

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001007

FILED  
Mar 13, 2012  
Secretary of State

**Entity Name:** MICANOPY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

706 NE CHOLOKKA BLVD.  
MICANOPY, FL 32667

**New Principal Place of Business:**

**Current Mailing Address:**

309 W. WHITING STREET  
MICANOPY, FL 32667

**New Mailing Address:**

**FEI Number:** 26-4168544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERTS, ETHEL F  
309 W. WHITING STREET  
MICANOPY, FL 32667 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROBERTS, ETHEL F  
Address: 309 W. WHITING ST.  
City-St-Zip: MICANOPY, FL 32667

Title: D  
Name: WARD, RONALD  
Address: 102 NE 5TH AVE.  
City-St-Zip: MICANOPY, FL 32667

Title: D  
Name: BURNHAM, JANIE  
Address: 17404 SE CR 234  
City-St-Zip: MICANOPY, FL 32667

Title: D  
Name: DYSON, BILLY  
Address: 16406 S. CR 325  
City-St-Zip: HAWTHORNE, FL 32640

Title: T  
Name: WEAVER, MARTHA A  
Address: 702 NW 2ND AVE.  
City-St-Zip: MICANOPY, FL 32667

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FAYE ROBETS

RA

03/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date