

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09597

FILED  
Aug 31, 2009  
Secretary of State

**Entity Name:** GOLFVIEW BAPTIST CHURCH OF LAKE WALES, FLORIDA, INCORPORATED

**Current Principal Place of Business:**

107 HIBISCUS DR  
LAKE WALES, FL 33898 US

**New Principal Place of Business:**

**Current Mailing Address:**

107 HIBISCUS DR  
LAKE WALES, FL 33898 US

**New Mailing Address:**

**FEI Number:** 59-1171901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

KOON, DAVID M  
107 HIBISCUS DR  
LAKE WALES, FL 33898 US

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

KOON, DAVID M REV  
2996 DAYTON DR  
WINTER HAVEN, FL 33884 US

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: REV DAVID M KOON

08/31/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TR ( ) Delete  
Name: BLACKMON, SALLY  
Address: PO BOX 4122  
City-St-Zip: LAKE WALES, FL 33859

Title: TR ( ) Delete  
Name: CLARK, BILL  
Address: 1540 LIBBY RD  
City-St-Zip: BABSON PARK, FL 35827

Title: TR ( ) Delete  
Name: HUCKABY, WAYNE  
Address: 3921 MILLSTONE ST  
City-St-Zip: LAKE WALES, FL 33898

Title: TR ( ) Delete  
Name: VAN NOTE, ROBERT  
Address: 201 PINEY AVE  
City-St-Zip: LAKE WALES, FL 33898

Title: TR ( ) Delete  
Name: FLETCHER, MELANIE  
Address: 982 OLD CUTLER ROAD  
City-St-Zip: LAKE WALES, FL 33898

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TR (X) Change ( ) Addition  
Name: BALL, SAM  
Address: 107 HIBISCUS DR  
City-St-Zip: LAKE WALES, FL 33898

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID M KOON

REV

08/31/2009

Electronic Signature of Signing Officer or Director

Date