2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11926

FILED May 07, 2009 Secretary of State

Entity Name: TREASURE ISLAND BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

4209 HWY 441 SE

OKEECHOBEE, FL 34974 US

Current Mailing Address: New Mailing Address:

P.O. BOX 730 4209 HWY 441 SE

OKEECHOBEE, FL 34973 US OKEECHOBEE, FL 34974 US

FEI Number: 59-2011477 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: Name and Address of New Registered Agent:

COLLIER, ALLEN SPENCER, BRADFORD S

4931 SE 128TH AVENUE 4209 HWY 441 SE

OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34974 US 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: BRADFORD SPENCER 05/07/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

TDTR (X) Change () Addition () Delete

COLLIER, ALLEN MORTON, MATTHEW Name: Name: 4931 SE 128TH AVE Address: 2980 HWY 710 Address: City-St-Zip: OKEECHOBEE, FL 34974 City-St-Zip: OKEECHOBEE, FL 34974

Title: TDTR Title: (X) Change () Addition () Delete

JORDAN, CECIL Name: JORDAN, CECIL Name: Address: 212 NE 8TH AVE Address: 212 NE 8TH AVE

City-St-Zip: OKEECHOBEE, FL 34972 City-St-Zip: OKEECHOBEE, FL 34972

Title: TOTR () Delete Title: (X) Change () Addition BARTON, JAMES C Name: BECK, GEORGE Name:

13801 SE HWY 441 LOT 104 1250 SW 86TH AVENUE Address: Address: City-St-Zip: OKEECHOBEE, FL 34974 City-St-Zip: OKEECHOBEE, FL 34974

Title: () Delete Title: () Change (X) Addition

SPENCER, BRADFORD S Name: Name: Address: Address: 4209 HWY 441 SE City-St-Zip: City-St-Zip: OKEECHOBEE, FL 34974

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: MATTHEW K MORTON TS 05/07/2009