

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12130

FILED  
Feb 28, 2009  
Secretary of State

Entity Name: GARDENVIEW BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

3139 ARMSDALE RD  
JACKSONVILLE, FL 32218 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 26400  
JACKSONVILLE, FL 32226 US

**New Mailing Address:**

FEI Number: 59-2244746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LUNDQUIST, WALTER E  
3139 ARMSDALE RD  
JACKSONVILLE, FL 32218 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: S ( ) Delete  
Name: HAND, RANDY  
Address: 3121 FRITZ ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: P ( ) Delete  
Name: LUNDQUIST, WALTER  
Address: 3532 SOUTEL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: V ( ) Delete  
Name: HARRIS, BOBBIE  
Address: 54277 DEERFIELD COUNTRY CLUB RD  
City-St-Zip: CALLAHAN, FL 32011

Title: T ( ) Delete  
Name: CARTER, CHARLIE  
Address: 9721 SAPPINGTON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: T (X) Delete  
Name: HENDRY, RONALD  
Address: 11303 SAMUEL DR  
City-St-Zip: JACKSONVILLE, FL 32218

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

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:

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: WALTER LUNDQUIST

P

02/28/2009

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

\_\_\_\_\_  
Date