2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N13515

Entity Name: OAK GROVE BAPTIST CHURCH OF MIDDLEBURG, FLORIDA, INC.

Current Principal Place of Business:

3645 COUNTY ROAD 215
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 238
MIDDLEBURG, FL 32068

New Mailing Address:

FEI Number: 59-2638354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLACKWELDER, WO
4400 TARRAGON AVE
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

BLACKWELDER, WO
5915 LONGBRANCH CEMETERY ROAD
JACKSONVILLE, FL 32234 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: _____ 04/08/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BLACKWELDER, W.O.
Address: 4400 TARRAGON AVE
City-St-Zip: MIDDLEBURG, FL 32068

Title: CK ( ) Delete
Name: TODD, EDGAR
Address: 2578 HALPERNS WAY
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD ( ) Delete
Name: TAYLOR, CLAUDIA
Address: 2902 GUAVA CT
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BLACKWELDER, W.O.
Address: 5915 LONGBRANCH CEMETERY ROAD
City-St-Zip: JACKSONVILLE, FL 32234

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: CLAUDIA H. TAYLOR TD 04/08/2009
Electronic Signature of Signing Officer or Director — Date