

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15143

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** TRUSTEES OF FIRST BAPTIST CHURCH OF IMMOKALEE, FLORIDA

**Current Principal Place of Business:**

1411 LAKE TRAFFORD RD  
IMMOKALEE, FL 34142 US

**New Principal Place of Business:**

**Current Mailing Address:**

1411 LAKE TRAFFORD RD  
IMMOKALEE, FL 34142 US

**New Mailing Address:**

**FEI Number:** 59-1113072

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CRAPSE, RALPH D  
2525 HWY 29 S  
IMMOKALEE, FL 34142 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 ( ) Delete  
Name: CRAPSE, RALPH D  
Address: 2525 HWY 29 S  
City-St-Zip: IMMOKALEE, FL 34142

Title: CC ( ) Delete  
Name: GARCIA, TONI  
Address: 981 22ND AVE NE  
City-St-Zip: NAPLES, FL 34120

Title: ST ( ) Delete  
Name: ROBISON, SERENA  
Address: 724 HWY 830-A  
City-St-Zip: FELDA, FL 33930

**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:

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: RALPH DONALD CRAPSE

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date