

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16362

FILED  
Aug 16, 2010  
Secretary of State

**Entity Name:** ELIM BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

3435 SW ELIM CHURCH RD  
FORT WHITE, FL 32038 US

**New Principal Place of Business:**

3435 SW ELIM CHURCH RD  
FORT WHITE, FL 32038 US

**Current Mailing Address:**

P O BOX 448  
FT. WHITE, FL 32038 US

**New Mailing Address:**

**FEI Number:** 59-2871796

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAWKINS, HUEY R  
6855 SW ELIM CHURCH ROAD  
FORT WHITE, FL 32038 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: D  
Name: PORTER, NORMAN  
Address: 164 SW COLLINS LANE  
City-St-Zip: FORT WHITE, FL 32038 US

Title: D  
Name: HAWKINS, HUEY R  
Address: 6855 SW ELIM CHURCH RD  
City-St-Zip: FORT WHITE, FL 32038 US

Title: T  
Name: HAWKINS, GWENDOLYN  
Address: 6855 SW ELIM CHURCH RD  
City-St-Zip: FORT WHITE, FL 32038 US

Title: S  
Name: PORTER, ANNIE LAURA  
Address: 164 SW COLLINS LANE  
City-St-Zip: FT. WHITE, FL 32038 US

Title: D  
Name: HERLONG, MIKE  
Address: 337 SW SCATTERED OAKS COURT  
City-St-Zip: FORT WHITE, FL 32038 US

I hereby 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 all other like empowered.

SIGNATURE: HUEY R. HAWKINS

D

08/16/2010

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

\_\_\_\_\_  
Date