

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2008 8:00 am
Secretary of State

02-26-2008 90009 030 ****61.25

DOCUMENT # N16932

1. Entity Name

KEPLER ROAD BAPTIST CHURCH OF DELAND, INC.



Principal Place of Business

251 KEPLER RD.
DELAND FL 32724
US

Mailing Address

251 KEPLER RD.
DELAND FL 32724
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2380550

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRADY, LINDA
111 SIESTA COURT
DELAND FL 32724

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME: RIFENBURG, DAN ☐ Delete
STREET ADDRESS: 1771 TALMADGE RD
CITY- ST- ZIP: DELAND FL 32724

TITLE
NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY- ST- ZIP:

TITLE
NAME: BRADY, ORVILLE ☒ Delete
STREET ADDRESS: 111 SIESTA CT
CITY- ST- ZIP: DELAND FL

TITLE
NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY- ST- ZIP:

TITLE
NAME: TSD BRADY, LINDA ☐ Delete
STREET ADDRESS: 111 SIESTA CT
CITY- ST- ZIP: DELAND FL 32724

TITLE
NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY- ST- ZIP:

TITLE
NAME: ENSOR, JOSEPH ☐ Delete
STREET ADDRESS: 1475 7TH AVENUE
CITY- ST- ZIP: DELAND FL

TITLE
NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY- ST- ZIP:

TITLE
NAME: TR ROBBINS, STEVE ☐ Delete
STREET ADDRESS: 2695 JASMINE ROAD
CITY- ST- ZIP: DELAND FL 32724

TITLE
NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY- ST- ZIP:

TITLE
NAME: TR BESS, RUTELL ☐ Delete
STREET ADDRESS: 1355 1ST CIR.
CITY- ST- ZIP: DELAND FL 32724

TITLE
NAME: ☐ Change ☐ Addition
STREET ADDRESS:
CITY- ST- ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda L. Brady
Linda L. Brady

2-15-08

386-734-6647

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #