

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17054

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF ATLANTIC BEACH, INC.

**Current Principal Place of Business:**

1050 MAYPORT ROAD  
ATLANTIC BEACH, FL 32233

**New Principal Place of Business:**

**Current Mailing Address:**

1050 MAYPORT ROAD  
ATLANTIC BEACH, FL 32233

**New Mailing Address:**

FEI Number: 59-1161109      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WHITEHEAD, EDWARD SR  
317 SARGO RD  
ATLANTIC BCH, FL 32233      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: PT ( ) Delete  
Name: SULLIVAN, FRED  
Address: 691 AMBERSACK LANE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VPT ( ) Delete  
Name: ABNER, JESSE  
Address: 2291 LUANA DR E  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DT ( ) Delete  
Name: ADAMS, JAMES  
Address: 14530 AQUA VISTA CIR  
City-St-Zip: JACKSONVILLE, FL 32224

Title: DT ( ) Delete  
Name: SMITH, DARRELL  
Address: 7842 BUACCANEER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

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

Title: PT (X) Change ( ) Addition  
Name: SULLIVAN, FRED  
Address: 691 AMBERJACK LANE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: SMITH, DARRELL  
Address: 1892 BUCCANEER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

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: FRED SULLIVAN

PT

03/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date