

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17999

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** NEW RIVER BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

16703 SW 144TH AVE  
BROOKER, FL 32622 US

**New Principal Place of Business:**

**Current Mailing Address:**

14509 S.W. 161ST ST.  
BROOKER, FL 32622 US

**New Mailing Address:**

**FEI Number:** 59-1895554

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDREWS, GLENDA  
14509 S.W. 161ST ST.  
BROOKER, FL 32622 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 ( ) Delete  
Name: ANDREWS, WILBUR  
Address: 14509 S.W. 161ST ST.  
City-St-Zip: BROOKER, FL 32622

Title: D ( ) Delete  
Name: STARLING, KENNETH  
Address: 16610 SW 144TH AVE  
City-St-Zip: BROOKER, FL 32622

Title: D ( ) Delete  
Name: STARLING, KENNETH R  
Address: 16560 SW 144TH AVE  
City-St-Zip: BROOKER, FL 32622

Title: D ( ) Delete  
Name: WALL, J E JR  
Address: 16394 SW 144TH AVE  
City-St-Zip: BROOKER, FL 32622

Title: D ( ) Delete  
Name: BALKCOM, JAMES  
Address: 19375 NW C R 235  
City-St-Zip: LAKE BUTLER, FL 32054

Title: D ( ) Delete  
Name: EMERY, PAUL  
Address: 14615 SW 151ST AVE  
City-St-Zip: BROOKER, FL 32622

**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:

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: GLENDA ANDREWS

RA

01/14/2009

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

\_\_\_\_\_  
Date