

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18652

FILED
Apr 30, 2009
Secretary of State

Entity Name: MIDDLE FLORIDA BAPTIST ASSEMBLY, INC.

Current Principal Place of Business:

C/O TIM KINSEY
247 SE SALVATION RD
BRANFORD, FL 32008 US

New Principal Place of Business:

Current Mailing Address:

C/O TIM KINSEY
247 SE SALVATION RD
BRANFORD, FL 32008 US

New Mailing Address:

FEI Number: 59-2803871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINSEY, TIM
247 SE SALVATION RD
BRANFORD, FL 32008 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: SD () Delete
Name: KINSEY, TIM
Address: 247 SE SALVATION RD
City-St-Zip: BRANFORD, FL

Title: TD () Delete
Name: PEARSON, DEBBIE
Address: 280 SW ROBINSON COURT
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: FOUNTAIN, FRITZ
Address: 1747 S WALKER AVENUE
City-St-Zip: LIVE OAK, FL 32064

Title: D () Delete
Name: BROWN, AUSE
Address: 4001 N.W. 9TH COURT
City-St-Zip: GAINESVILLE, FL 32601

Title: D () Delete
Name: CARON, HARN
Address: 124 NE CR 255
City-St-Zip: LEE, FL 32059

Title: D () Delete
Name: STOKES, GENE
Address: PO BOX 702
City-St-Zip: MADISON, FL 32341

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: ELIZABETH, WHITE
Address: 4070 SW CR 534
City-St-Zip: MAYO, FL 32066

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

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

Title: D (X) Change () Addition
Name: STOKES, GENE
Address: PO BOX 702
City-St-Zip: MADISON, FL 32341

Title: D (X) Change () Addition
Name: BOWERS, HERMAN
Address: 17015 NE CR 1471
City-St-Zip: WALDO, FL 32694

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: TIM KINSEY

SD

04/30/2009

Electronic Signature of Signing Officer or Director

Date