

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19855

FILED
May 24, 2009
Secretary of State

Entity Name: THE EVELENAR MISSIONARY BAPTIST CHURCH INC.

Current Principal Place of Business:

2820 CARVER AVE
CRESTVIEW, FL 325368965 US

New Principal Place of Business:

Current Mailing Address:

2820 CARVER AVE
CRESTVIEW, FL 325368965 US

New Mailing Address:

FEI Number: 59-2842270 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCLAUGHLIN, LOREAN
5551 BRACKIN
CRESTVIEW, FL 32539 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: MALONE, JEROME
Address: 105 POINTER LANE
City-St-Zip: CRESTVIEW, FL 32539

Title: T () Delete
Name: MCLAUGHLIN, LOREAN
Address: 5551 BRACKIN
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: GLENN, TONY
Address: 115 NICOLE LN
City-St-Zip: CRESTVIEW, FL 32539

Title: P () Delete
Name: RANDOLPH, BENJAMIN
Address: 101 FOREST DR
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DEC () Delete
Name: MERRILL, RUDOLPH
Address: 503 W GRIFFIN AVE
City-St-Zip: CRESTVIEW, FL 32539

Title: T () Delete
Name: JOHNSON, JOYCE
Address: 339 HUDSON DR
City-St-Zip: CRESTVIEW, FL 32539

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
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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: LREAN MCLAUGHLIN

T

05/24/2009

Electronic Signature of Signing Officer or Director

Date