

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20947

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Entity Name:** WEST CHARLOTTE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

11050 WILMINGTON BLVD  
ENGLEWOOD, FL 34224 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 507  
ENGLEWOOD, FL 34295 US

**New Mailing Address:**

**FEI Number:** 59-2813682

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRIEST, SR., MICHAEL DR.  
11050 WILLMINGTON BLVD  
ENGLEWOOD, FL 34224 US

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

PAULIKS, JOSEPH PASTOR  
11050 WILLMINGTON BLVD  
ENGLEWOOD, FL 34224 US

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: JOSEPH PAULIKS

03/05/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: AC  
Name: PLANT, LINDA  
Address: 12255 VANLOON AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: TC  
Name: SHIFFLETT, DONNA C  
Address: P O BOX 507  
City-St-Zip: ENGLEWOOD, FL 34295

Title: T  
Name: LISTA, LOUIS  
Address: 5432 PHELPS LANE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: T  
Name: PLANT, DANA  
Address: 12255 VANLOON AVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

I hereby 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 all other like empowered.

SIGNATURE: DONNA SHIFFLETT

T

03/05/2010

Electronic Signature of Signing Officer or Director

Date