

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22532

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF LAKE WALES, INC.

**Current Principal Place of Business:**

338 E. CENTRAL AVENUE  
LAKE WALES, FL 33853

**New Principal Place of Business:**

**Current Mailing Address:**

338 E. CENTRAL AVENUE  
LAKE WALES, FL 33853

**New Mailing Address:**

**FEI Number:** 59-0818915      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

HOLMES, WILLIAM E  
1430 S HIGHLAND PARK DRIVE  
LAKE WALES, FL 33898 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: V ( ) Delete  
Name: OTHOSON, HOWARD  
Address: 17 ENCLAVE DR SE  
City-St-Zip: WINTER HAVEN, FL 33884

Title: P ( ) Delete  
Name: HOLMES, BILL  
Address: 1430 S HIGHLAND PARK DRIVE  
City-St-Zip: LAKE WALES, FL 33898

Title: T ( ) Delete  
Name: HICKS, RONALD  
Address: 3460 WHITE OAK COURT  
City-St-Zip: LAKE WALES, FL 33898

Title: S ( ) Delete  
Name: SIKES, JEFF  
Address: 31 FAIRCHILD STREET  
City-St-Zip: BABSON PARK, FL 33827

Title: D ( ) Delete  
Name: SIMS, DONALD  
Address: 1011 DESTIN DRIVE  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: ELMORE, DOUG  
Address: 2008 CAPPS ROAD  
City-St-Zip: LAKE WALES, FL 33898

**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: WILLIAM E. HOLMES

P

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date