## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N24471

FILED Apr 21, 2008 Secretary of State

Entity Name: EASTSIDE BAPTIST CHURCH OF MULBERRY, INC

Current Principal Place of Business: New Principal Place of Business:

301 NE TWELFTH AVE MULBERRY, FL 33860 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1257

MULBERRY, FL 33860 US

FEI Number: 59-2878678 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GALLUPS, JOHN R 1310 NE 2ND STREET MULBERRY, FL 33860 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:

Floatenia Cinnatura of Danistana d Annat

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ( ) Delete Title: TD (X) Change ( ) Addition

 Name:
 FOSTER, JOHN
 Name:
 HAYES, JERRY

 Address:
 108 ALGONQUIN
 Address:
 PO BOX 1257

 City-St-Zip:
 MULBERRY, FL 33860
 City-St-Zip:
 MULBERRY, FL 33860

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: MCDONALD, DARRELL Name: MCDONALD, DARRELL

Address: 520 LEMON STREET Address: PO BOX 1257

City-St-Zip: MULBERRY, FL 33860 City-St-Zip: MULBERRY, FL 33860

Title: TD () Delete Title: () Change () Addition

 Name:
 HAYES, JERRY
 Name:

 Address:
 1404 NE 1ST STREET
 Address:

 City-St-Zip:
 MULBERRY, FL 33860
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: GARNER, ALBERT Name: MCDONALD, RUTH
Address: 621 ORANGE VALLEY CIRCLE Address: PO BOX 1257

City-St-Zip: LAKELAND, FL 33813 City-St-Zip: MULBERRY, FL 33860 US

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 MCDONALD, RUTH
 Name:

 Address:
 520 LEMON STREET
 Address:

 City-St-Zip:
 MULBERRY, FL 33860
 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: RUTH MCDONALD S 04/21/2008