## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N25933

FILED Apr 29, 2009 Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF MIDWAY, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ST MIDWAY ROA ITY, FL 33565	AD US			
Current Mailing Address:			New Mailing Addres	ss:	
2902 EAST MIDWAY ROAD					
PLANT CI	ITY, FL 33565	US			
El Number	r: 59-1936407	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
lame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
2940 SPR	AN, MITCHELL RING HAMMOCK ITY, FL 33567	(DRIVE US			
	e named entity s te of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both	
SIGNATU	IRE:				
	Electroni	c Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
itle: lame: .ddress: city-St-Zip:	VD () OSBORNE, JOH 2041 WILLIAMS PLANT CITY, FL	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
itle: lame: .ddress: city-St-Zip:	WEISSMAN, MIT	AMMOCK DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
itle: lame: ddress: city-St-Zip:	SD () CATO, CARMEN 2086 E. LAWRE PLANT CITY, FL	NCE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
ïtle: lame: .ddress:	TD () BUCHANAN, RU 2710 NORTH W PLANT CITY, FL	LDER ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
ity-St-Zip:			Title:	( ) Change ( ) Addition	
	D () FARMER, JERR 1706 WILLIAMS PLANT CITY, FL	ROAD	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: MITCHELL WEISSMAN PD 04/29/2009