

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26906

FILED  
Jan 27, 2010  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF ARCADIA, INC.

**Current Principal Place of Business:**

1006 N. BREVARD AVE  
ARCADIA, FL 34266 US

**New Principal Place of Business:**

**Current Mailing Address:**

1006 N. BREVARD AVE  
ARCADIA, FL 34266 US

**New Mailing Address:**

**FEI Number:** 59-0689702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, FLETCHER  
124 N. BREVARD AVE.  
ARCADIA, FL 34266 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: P  
Name: COKER, DALE  
Address: 3960 N.E. BARTON TERRACE  
City-St-Zip: ARCADIA, FL 34266

Title: V/D  
Name: WOMACK, ROBERT SR.  
Address: 4288 S.E. COUNTY RD. 760  
City-St-Zip: ARCADIA, FL 34266

Title: S  
Name: POTTER, MICHELLE  
Address: 2230 N.W. BROWNVILLE ST.  
City-St-Zip: ARCADIA, FL 34266

Title: D  
Name: PARKER, ZEB  
Address: 5484 S.E. BROWN RD.  
City-St-Zip: ARCADIA, FL 34266

Title: D  
Name: NORRIS, PETE  
Address: P.O. BOX 653  
City-St-Zip: ARCADIA, FL 34265

Title: T  
Name: SORRELLS, STEVE  
Address: 6923 CR 661  
City-St-Zip: ARCADIA, FL 34266

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: DALE COKER

P

01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date