2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29540

FILED Jan 14, 2009 Secretary of State

Entity Name: THE AMERICAN BAPTIST CHURCH OF LAKELAND, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	AUGHTERY R D, FL 33810	RD US		
Current Mailing Address:			New Mailing Address:	
	AUGHTERY F D, FL 33810	RD US		
FEI Number	: 59-2856559	FEI Number Applied For (FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of (Current Registered Ager	Name and Address of New Registered Agent:	
MILLER, ROBERT T. 100 EAST LEMON STREET PO BOX 8169 LAKELAND, FL 338028169 US			MILLER, ROBERT T. 100 EAST LEMON STREET LAKELAND, FL 338028169 US	
The above in the State	e named entity e of Florida.	submits this statement for	e purpose of changing its registered office or registered agent, or both,	
SIGNATUI	RE:		01/14/2009	
	Electro	nic Signature of Registere	Agent Date	
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PD (REIF, MARTHA 1579 LONG BO LAKELAND, FI	OW DR.	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	SD (JOHNS, MAXIN 401 MONROE LAKELAND, FI	DR	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	VD (WHITE, CLAUI 1847 MASTER LAKELAND, FI	S LN	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	TD (WOOD, PHYLI 1610 REYNOL LAKELAND, FI	DS ROAD #32	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	() Delete	Title: SD () Change (X) Addition Name: PETTIS, VIRGINAI Address: 3130 INDIAN RIDGE PLACE City-St-Zip: LAKELAND, FL 33810	
Title: Name:	() Delete	Title: SD () Change (X) Addition Name: SKINNER, VIRGINIA Address: 1798 FOXHILL DRIVE	

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: MAXINE JOHNS SD 01/14/2009