

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30963

FILED
Apr 10, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF GOLDEN GATE, INC.

Current Principal Place of Business:

2741 SANTA BARBARA BOULEVARD
NAPLES, FL 34116 US

New Principal Place of Business:

Current Mailing Address:

2741 SANTA BARBARA BOULEVARD
NAPLES, FL 34116 US

New Mailing Address:

FEI Number: 65-0134693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, DWAYNE
2770 47TH STREET SW
NAPLES, FL 34116 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 () Delete
Name: BOELK, ROBERT
Address: 5605 POINTED LEAF LANE
City-St-Zip: NAPLES, FL 34116

Title: T () Delete
Name: SHIELDS, DWAYNE
Address: 2770 47TH ST., NW
City-St-Zip: NAPLES, FL 34116

Title: TR () Delete
Name: THERIAC, KENNETH
Address: 16 OSAGE TRL
City-St-Zip: NAPLES, FL 34113

Title: TR () Delete
Name: CRYTZER, CYNTHIA S
Address: 5253 32RD AVE SW
City-St-Zip: NAPLES, FL 34116

Title: TR () Delete
Name: SHIELDS, DWAYNE
Address: 8770-47TH ST SW
City-St-Zip: NAPLES, FL 34116

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:

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: ROBERT BOELK

P

04/10/2009

Electronic Signature of Signing Officer or Director

Date