

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33940

FILED
Mar 12, 2009
Secretary of State

Entity Name: BEULAH BAPTIST CHURCH OF CLAY COUNTY, INC.

Current Principal Place of Business:

4579 STATE ROAD 21
P.O. BOX 210
MIDDLEBURG, FL 320500210 US

New Principal Place of Business:

4579 STATE ROAD 21
GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address:

4579 STATE ROAD 21
P.O. BOX 210
MIDDLEBURG, FL 320500210 US

New Mailing Address:

4579 STATE ROAD 21
GREEN COVE SPRINGS, FL 32043 US

FEI Number: 59-2379709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, GLENN
6409 SHARRON RD
GREEN COVE SPRINGS, FL 32043 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: TD () Delete
Name: WHITLEY, THOMAS M SR
Address: 5350 OTTER LN
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD () Delete
Name: COOK, VERNON
Address: 4754 JAVELINE CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD () Delete
Name: THOMPSON, GLENN A.,
Address: 6409 SHARRON RD.
City-St-Zip: GREEN COVE SPNG., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: THOMPSON, GLENN A
Address: 6409 SHARRON ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: HICKEY, CARLTON B
Address: 6347 PAYNE RD.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: GLENN A. THOMPSON

TD

03/12/2009

Electronic Signature of Signing Officer or Director

Date