2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N36636

Entity Name: REDEMPTION BAPTIST CHURCH, INC.

Current Principal Place of Business:

3501 N.E. 3 AVE.
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

3501 NE 3 AVE
POMPANO BEACH, FL 33064 US

New Mailing Address:

FEI Number: 65-0175176 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLERVEAUX, HECTOR
5621 NW 43 WAY
COCONUT CREEK, FL 33073 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:	D	( ) Delete
Name:	CLERVEAUX, HECTOR,	
Address:	5621 NW 43RD WAY	
City-St-Zip:	COCONUT CREEK, FL 33073 US	
Title:	D	( ) Delete
Name:	CLERVEAULT, ABNER	
Address:	1835 N DIXIE HWY	
City-St-Zip:	POMPANO BCH, FL 33060	
Title:	D	( ) Delete
Name:	METELLUS, LUCIUS	
Address:	211 NE 25 CT	
City-St-Zip:	POMPANO BEACH, FL 33060	
Title:	S	( ) Delete
Name:	JASMIN, CLARA	
Address:	22738 SW 10TH ST	
City-St-Zip:	BOCA RATON, FL 33433	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	CLERVEAUX, ABNER	
Address:	1835 N DIXIE HWY	
City-St-Zip:	POMPANO BCH, FL 33060	
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: HECTOR CLERVEAUX DIR. 01/16/2009

Electronic Signature of Signing Officer or Director — Date