

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37039

FILED
Jan 23, 2009
Secretary of State

Entity Name: MT. PISGAH BAPTIST CHURCH, INC.

Current Principal Place of Business:

6210 MT. PISGAH ROAD
FORT MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

6210 MT. PISGAH ROAD
FORT MEADE, FL 33841

New Mailing Address:

FEI Number: 59-2480912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVENUE
SEBRING, FL 35870 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: DP () Delete
Name: LARRAMORE, LOYD M
Address: 3825 EDISON AVE.
City-St-Zip: BOWLING GREEN, FL 33834

Title: DT () Delete
Name: GRANT, EUGENE
Address: 3440 MT PISGAH ROAD
City-St-Zip: FORT MEADE, FL 33841

Title: DS () Delete
Name: FARRIS, RAY
Address: 409 W. BROADWAY ST.
City-St-Zip: FORT MEADE, FL 33841

Title: DV () Delete
Name: COKER, RONALD
Address: 2802 BOYD COWART RD
City-St-Zip: WAUCHULA, FL 33873

Title: DV () Delete
Name: NORTHUP, PERRY
Address: 1324 HICKORY LANE SOUTH
City-St-Zip: FORT MEADE, FL 33841

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: LOYD M. LARRAMORE

DP

01/23/2009

Electronic Signature of Signing Officer or Director

Date