

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37690

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: MAPLE GROVE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

120 E SR-78 NW  
MOORE HAVEN, FL 33471 US

**New Principal Place of Business:**

**Current Mailing Address:**

120 E SR-78 NW  
MOORE HAVEN, FL 33471 US

**New Mailing Address:**

FEI Number: 59-2353574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARVIN, PATTY  
120 E SR 78 NW  
LAKEPORT, FL 33471 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: BECK, JERRY L  
Address: 9500 TED BECK RD  
City-St-Zip: MOORE HAVEN, FL 33471

Title: D ( ) Delete  
Name: BROWN, KENNETH A  
Address: 37385 OLD LAKEPORT RD  
City-St-Zip: MOORE HAVEN, FL 33471

Title: ST ( ) Delete  
Name: BROWN, LOUISE  
Address: 3735 OLD LAKEPORT RD  
City-St-Zip: MOORE HAVEN, FL 33471

Title: D ( ) Delete  
Name: MCEACHIN, WM. T JR  
Address: 11042 ECHO AVE  
City-St-Zip: MOORE HAVEN, FL 33471

**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:

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: LOUISE BROWN

ST

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date