

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N38423

FILED
Oct 12, 2009
Secretary of State

Entity Name: LOVEDALE BAPTIST CHURCH, INC.

Current Principal Place of Business:

6595 LOVEDALE RD
BASCOM, FL 32423

New Principal Place of Business:

Current Mailing Address:

6595 LOVEDALE RD
BASCOM, FL 32423

New Mailing Address:

FEI Number: 59-3017542 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRUNER, TERESA
6409 WOLF POND RD.
BASCOM, FL 32423 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: TERESA BRUNER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PITTMAN, MILTON
Address: 6386 LOVEDALE RD
City-St-Zip: BASCOM, FL 32423

Title: D () Delete
Name: BRUNER, TED
Address: 6409 WOLF POND RD
City-St-Zip: BASCOM, FL 32423

Title: D () Delete
Name: BASFORD, ARTHUR
Address: 4132 WINTERGREEN RD
City-St-Zip: GREENWOOD, FL 32443

Title: D () Delete
Name: CHANDLER, HARVEL
Address: 6539 WESTON LOOP
City-St-Zip: BASCOM, FL 32423

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: EDWARD R HELMS

TRES

10/12/2009

Electronic Signature of Signing Officer or Director

Date