

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41957

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** CORNERSTONE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

2925 CANOE CREEK  
ST CLOUD, FL 34772

**New Principal Place of Business:**

**Current Mailing Address:**

2925 CANOE CREEK  
ST CLOUD, FL 34772

**New Mailing Address:**

FEI Number: 59-2906922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUCHNER, VALERIE  
2925 CANOE CREEK RD.  
ST. CLOUD, FL 34772 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: PD ( ) Delete  
Name: BLACKWELL, J NATHAN  
Address: 400 CHANCELLOR CT  
City-St-Zip: ST CLOUD, FL 34769

Title: VD ( ) Delete  
Name: GRAY, ROBERT  
Address: 1638 LISA LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: SD ( ) Delete  
Name: MALONEY, BRENDA  
Address: 4166 BOB WHITE TRAIL  
City-St-Zip: ST. CLOUD, FL 34772

Title: TD ( ) Delete  
Name: BUCHNER, VALERIE  
Address: 826 CHAMBERLAIN TRAIL  
City-St-Zip: ST CLOUD, FL 34772

**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 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: VALERIE BUCHNER

TD

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date