

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42083

FILED
Mar 19, 2009
Secretary of State

Entity Name: NORTHSIDE MISSIONSARY BAPTIST CHURCH OF OCALA, INC.

Current Principal Place of Business:

2321 N.E. 11TH AVE
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

2321 N.E. 11TH AVE
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-1883559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCHER, WILBUR R AGENT
6760 CHERRY ROAD
OCALA, FL 34472 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: P () Delete
Name: NOVINGER, GLENN E
Address: 976 NE 120TH AVE
City-St-Zip: OXFORD, FL 34484

Title: P () Delete
Name: HATCHER, WILBUR,
Address: 6760 CHERRY ROAD
City-St-Zip: OCALA, FL 34472 US

Title: SDT () Delete
Name: REEDY, JAMES E
Address: 3591 S.E. 38TH COURT
City-St-Zip: OCALA, FL 34471

Title: TDT () Delete
Name: FARMER EWING E,
Address: 20840 4TH ST
City-St-Zip: MCINTOSH, FL

Title: DT (X) Delete
Name: HENKE, WILLIAM J JR
Address: 4504 SE 13TH AT
City-St-Zip: OCALA, FL 34471

Title: DT () Delete
Name: DALE, ADAMS
Address: 345 N.E. 61ST TERRACE
City-St-Zip: OCALA, FL 34470

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
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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: WILBUR R. HATCHER

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

Date