

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42127

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** FIRST BAPTIST CHILD CARE CENTER, INC.

**Current Principal Place of Business:**

1010 E MEMORIAL BLVD  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 90669  
LAKELAND, FL 33804

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WELLS, EUGENE E.  
1010 E MEMORIAL BLVD  
LAKELAND, FL 33801 US

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

JONES, RONALD L.  
1010 E MEMORIAL BLVD  
LAKELAND, FL 33801 US

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: RONALD L. JONES

04/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DENNIS, JAY  
Address: 1010 E MEMORIAL BLVD  
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete  
Name: WELLS, EUGENE E.,  
Address: 1010 E MEMORIAL BLVD  
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete  
Name: LACEY, ANITA K  
Address: 1010 E MEMORIAL BLVD  
City-St-Zip: LAKELAND, FL 33801

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: JONES, RONALD L.,  
Address: 1010 E MEMORIAL BLVD  
City-St-Zip: LAKELAND, FL

Title: D (X) Change ( ) Addition  
Name: GOODELL, GERALD  
Address: 1010 E MEMORIAL BLVD  
City-St-Zip: LAKELAND, FL 33801

Title: D ( ) Change (X) Addition  
Name: PARCHETA, ANGIE  
Address: 1010 E MEMORIAL BLVD  
City-St-Zip: LAKELAND, FL 33801

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: RONALD L. JONES

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date