

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42418

FILED
Apr 04, 2010
Secretary of State

Entity Name: NORTH GAINESVILLE BAPTIST CHURCH, INC.

Current Principal Place of Business:

3401 N.W. 34TH STREET
SUITE 4
GAINESVILLE, FL 32605 US

New Principal Place of Business:

6203 NW 39TH AVENUE
GAINESVILLE, FL 32605 US

Current Mailing Address:

4909 NW16TH PLACE
GAINESVILLE, FL 32605 US

New Mailing Address:

FEI Number: 59-3061553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANNING, GARY D
11534 NW 19TH PLACE
GAINESVILLE, FL 32605 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: DC
Name: MANNING, GARY D PASTOR
Address: 11534 NW 19TH PLACE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: O
Name: DEJESUS, PABLO FINAN.
Address: 4909 NW 16TH PLACE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: D
Name: TAYLOR, ROBERT DEACON
Address: 9127 NW 9TH AVENUE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: D
Name: LING, FRANK DEACON
Address: 11325 SW 16TH STREET
City-St-Zip: MICANOPY, FL 32667 US

Title: D
Name: RAWLS, EDDIE DEACON
Address: 2049 NW 21ST LANE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: O
Name: RIVERA, PETE FINAN.
Address: 11603 NW 9TH LANE
City-St-Zip: GAINESVILLE, FL 32606

I hereby 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 all other like empowered.

SIGNATURE: PABLO DE JESUS

MR.

04/04/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date