

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43142

FILED
Apr 07, 2009
Secretary of State

Entity Name: TREASURE COAST BAPTIST CHURCH OF ST. LUCIE COUNTY, FLORIDA, INC.

Current Principal Place of Business:

1885 SW DEL RIO BLVD.
PORT ST. LUCIE, FL 34953 US

New Principal Place of Business:

Current Mailing Address:

1885 SW DEL RIO BLVD
PORT ST. LUCIE, FL 34953 US

New Mailing Address:

FEI Number: 65-0310861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REESE, FRANKLIN J DC
931 SW DUBOIS AVENUE
PORT ST. LUCIE, FL 34953 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: DV () Delete
Name: WINDER, PHILLIP
Address: 8306 SANTA CLARA BLVD
City-St-Zip: FORT PIERCE, FL 34951

Title: DV () Delete
Name: GOLDSMITH, JIM SR
Address: 1310 SE VESTRIDGE ST.
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KRAFT, KENNETH L
Address: 1715 SW BELLEVUE AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: DV (X) Change () Addition
Name: GOLDSMITH, JAMES SR
Address: 1310 SE VESTRIDGE ST.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D () Change (X) Addition
Name: JEFFREY, ROSS
Address: 2912 SW PORT SAINT LUCIE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: KENNETH L. KRAFT

D

04/07/2009

Electronic Signature of Signing Officer or Director

Date