

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43982

FILED
Apr 30, 2009
Secretary of State

Entity Name: SHILOH BAPTIST CHURCH OF BELLEVIEW, INC.

Current Principal Place of Business:

12351 SOUTH US HWY 301
BELLEVIEW, FL 34420 US

New Principal Place of Business:

11998 SE 84TH AVE
BELLEVIEW, FL 34420 US

Current Mailing Address:

P O BOX 2938
BELLEVIEW, FL 32620

New Mailing Address:

FEI Number: 59-3066670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, SHANNON W
2800 SE 157TH LANE RD.
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

KING, SHANNON W
11998 SE 84TH AVE
BELLEVIEW, FL 34420 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:

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KING, WAYNE
Address: 2800 SE 157 LN RD
City-St-Zip: SUMMERFIELD, FL

Title: V () Delete
Name: KING, LYNDIA
Address: 2800 SOUTHEAST 157TH LANE ROAD
City-St-Zip: SUMMERFIELD, FL 34491

Title: T () Delete
Name: KING, BETTY
Address: 2800 SE 157TH LANE RD.
City-St-Zip: SUMMERFIELD, FL 34491

Title: S () Delete
Name: LATUK, CHARLOTTE
Address: 11998 SOUTHEAST 84TH AVENUE
City-St-Zip: BELLEVIEW, FL 34420

Title: D () Delete
Name: KING, DAVID M
Address: 2800 SE 157TH LANE RD.
City-St-Zip: SUMMERFIELD, FL 34491

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:

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: WAYNE E KING

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date