

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46935

FILED
Feb 13, 2009
Secretary of State

Entity Name: THE FIRST BAPTIST CHURCH OF DELAND, FLORIDA, INCORPORATED

Current Principal Place of Business:

725 N WOODLAND BLVD
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

725 N WOODLAND BLVD
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-0696286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAINES, BRENDA
2679 WHITEHURST RD
DELAND, FL 32720 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: TR () Delete
Name: MEDLIN, JAMES
Address: 809 W HOWRY AVE
City-St-Zip: DELAND, FL 32720

Title: TR () Delete
Name: MIZE, JIM
Address: 4234 MAPLE LEAF LANE
City-St-Zip: DELAND, FL 32724

Title: TR () Delete
Name: HEACOCK, CHARLES
Address: 1034 TORCHWOOD DR
City-St-Zip: DELAND, FL 32724

Title: TR () Delete
Name: EDMONSON, GRAVES
Address: 1010 N. FLORIDA AVE.
City-St-Zip: DELAND, FL 32720

Title: TR () Delete
Name: SMOAK, CHARLES
Address: 1035 S. MASSACHUSETTS
City-St-Zip: DELAND, FL 32724

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: BETTY W. KELLY CPA PA

CPA

02/13/2009

Electronic Signature of Signing Officer or Director

Date