

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 05, 2009
Secretary of State**

DOCUMENT# N49314

Entity Name: HILLSBOROUGH BAPTIST SCHOOL, INC.

Current Principal Place of Business:

6021 WILLIAMS ROAD
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

6021 WILLIAMS ROAD
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-3137417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, STEVE
8604 WILLIAMS ROAD
SEFFNER, FL 33584 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: D () Delete
Name: BOYD, DOUG
Address: 211 W. CURTIS
City-St-Zip: TAMPA, FL 33603

Title: PD () Delete
Name: BARBER, STEVE
Address: 8604 WILLIAMS RD
City-St-Zip: SEFFNER, FL 33584

Title: D () Delete
Name: HEATHERLY, JERRY
Address: 9633 HARRY PLACE
City-St-Zip: DOVER, FL 33527

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:

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: STEVE K BARBER

PRES

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date