

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000839

FILED
Jan 24, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF ZELLWOOD, INC.

Current Principal Place of Business:

2903 WINIFRED ST.
P.O. BOX 517
ZELLWOOD, FL 32798

New Principal Place of Business:

2903 WINIFRED ST.
ZELLWOOD, FL 32798

Current Mailing Address:

2903 WINIFRED ST.
P.O. BOX 517
ZELLWOOD, FL 32798

New Mailing Address:

P.O. BOX 517
ZELLWOOD, FL 32798

FEI Number: 59-3219567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIS, JANICE
2903 WINIFRED STREET
ZELLWOOD, FL 32798 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: ADAMS, MARY
Address: 2903 WINIFRED ST.
City-St-Zip: ZELLWOOD, FL 32798

Title: D () Delete
Name: WILLIS, JIMMY
Address: 2903 WINNIGRED ST.
City-St-Zip: ZELLWOOD, FL 32798

Title: D () Delete
Name: HAYDEN, ISAAC
Address: 2903 WINIFRED ST.
City-St-Zip: ZELLWOOD, FL 32798

Title: D () Delete
Name: GATLIN, VIRGINIA
Address: 2903 WINIFRED ST.
City-St-Zip: ZELLWOOD, FL 32798

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:

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: VIRGINIA GATLIN

D

01/24/2009

Electronic Signature of Signing Officer or Director

Date