

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002709

FILED
Apr 14, 2009
Secretary of State

Entity Name: COOPERATIVE BAPTIST FELLOWSHIP FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

217 HILLCREST ST.
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 2556
LAKELAND, FL 33806 US

New Mailing Address:

FEI Number: 59-3223420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, PATRICK R
817 LEXINGTON STREET
LAKELAND, FL 33801 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: CD () Delete
Name: ANDERSON, PATRICK R
Address: 817 LEXINGTON STREET
City-St-Zip: LAKELAND, FL 33801

Title: D () Delete
Name: ALLERTON, TOM
Address: 545 KAREN COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 327013635

Title: D () Delete
Name: BASS, JEAN
Address: 1824 27 AVE
City-St-Zip: VERO BEACH, FL 329603069

Title: D () Delete
Name: FUTCH SMITH, NATALIE
Address: 105 SANTIAGO DR 103
City-St-Zip: JUPITER, FL 334582750

Title: D () Delete
Name: DAY, HAYWOOD
Address: 4580 RANGE RD
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: MCQUAIG, DAWSON
Address: 4662 SWILCAN BRIDGE LANE, S.
City-St-Zip: JACKSONVILLE, FL 32207 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WILLINGHAM, JEAN
Address: 1698 MANOR WAY S
City-St-Zip: ST. PETERSBURG, FL 337126035

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SIZEMORE, TIM
Address: 6705 HIGH GROVE DR
City-St-Zip: LAKELAND, FL 338131869

Title: D (X) Change () Addition
Name: MILLS, ROBERT
Address: 4491 WHISPER DRIVE
City-St-Zip: PENSACOLA, FL 325046761 US

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: PATRICK R. ANDERSON

C

04/14/2009

Electronic Signature of Signing Officer or Director

Date