

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005439

FILED
Apr 30, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF VENUS, INC.

Current Principal Place of Business:

16 CHURCH DRIVE
VENUS, FL 33960

New Principal Place of Business:

Current Mailing Address:

16 CHURCH DRIVE
VENUS, FL 33960

New Mailing Address:

FEI Number: 59-2392596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, BILL REV.
374 CANAL WAY N.E.
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

GODWIN, WAYNE
16 CHURCH DR.
VENUS, FL 33960 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: WAYNE GODWIN

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: TANNER, REYNOLDS
Address: 74 MYRTLE BUSH LANE
City-St-Zip: VENUS, FL 33960

Title: DVT () Delete
Name: PREVATT, JOHNNIE R
Address: 4508 CORTEZ BLVD
City-St-Zip: SEBRING, FL 33872

Title: DST () Delete
Name: PEEPLES, IRENE
Address: 855 DETJENS DAIRY ROAD
City-St-Zip: VENUS, FL 33960

Title: T () Delete
Name: LANZL, GERALD
Address: 139 JAMISON AVE
City-St-Zip: LAKE PLACID, FL 33852

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: T (X) Change () Addition
Name: TILLMAN, GENIE
Address: 1637 C.R. 29
City-St-Zip: LAKE PLACID, FL 33852

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: GENIE TILLMAN

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date