

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001263

FILED
Apr 24, 2009
Secretary of State

Entity Name: RIVERSIDE BAPTIST CHURCH OF LAFAYETTE COUNTY, INC.

Current Principal Place of Business:

CR 251
MAYO, FL 32066

New Principal Place of Business:

Current Mailing Address:

2402 NW CR 251
MAYO, FL 32066

New Mailing Address:

FEI Number: 59-2345843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYONS, RICKY
2402 NW CR 251
MAYO, FL 32066 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: PD () Delete
Name: BUCHANAN, FRANKLIN G
Address: 973 NW MERIDIAN RD
City-St-Zip: MAYO, FL 32066

Title: VD () Delete
Name: LYONS, ROLAND
Address: 2687 NW CR 251
City-St-Zip: MAYO, FL 32066

Title: VD () Delete
Name: STARLING, GUY
Address: 2871 NW CR 251
City-St-Zip: MAYO, FL 32066

Title: VD () Delete
Name: LYONS, RICKY
Address: PO BOX 88 N/A
City-St-Zip: MAYO, FL 32066

Title: VD () Delete
Name: LYONS, DALE
Address: 951 NW CR 292
City-St-Zip: MAYO, FL 32066

Title: STD () Delete
Name: LAMB, BILL
Address: 563 N FLETCHER AVE
City-St-Zip: MAYO, FL 32066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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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: RICKY LYONS

VD

04/24/2009

Electronic Signature of Signing Officer or Director

Date