

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jun 30, 2009  
Secretary of State**

DOCUMENT# N95000002889

Entity Name: PLEASANT GROVE BAPTIST CHURCH OF MAYO, FL. INC.

**Current Principal Place of Business:**

816 SW CR 351  
MAYO, FL 32066

**New Principal Place of Business:**

**Current Mailing Address:**

816 SW CR 351  
MAYO, FL 32066

**New Mailing Address:**

FEI Number: 59-3314581      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BABIONE, TODD  
816 SW CR 351  
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: T                    ( ) Delete  
Name: WEBB, ROGER  
Address: 816 SW CR 351  
City-St-Zip: MAYO, FL 32066

Title: T                    ( ) Delete  
Name: BRANCHE, BRUCE  
Address: 816 SW CR 351  
City-St-Zip: MAYO, FL 32066

Title: T                    (X) Delete  
Name: HUTCHESON, JAMES  
Address: RT. 3 BOX 330 - CR350A  
City-St-Zip: MAYO, FL 32066

Title: T                    ( ) Delete  
Name: HYMAN, FRIER  
Address: 330 NW LJ FRIER DR.  
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:

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: BRUCE BRANCHE

T

06/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date