

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005537

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** FIRST BAPTIST CHURCH OF ALTURAS, INC.

**Current Principal Place of Business:**

7690 POINSETTA AVENUE  
ALTURAS, FL 33820 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 38 N/A  
ALTURAS, FL 33820 US

**New Mailing Address:**

**FEI Number:** 59-3389858

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HIELSCHER, EVELYN  
3RD STREET AND OAK DRIVE  
ALTURAS, FL 33820 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: HIELSCHER, KEVIN  
Address: PO BOX 38-7690 POINSETTA AVE  
City-St-Zip: ALTURAS, FL 33820

Title: T ( ) Delete  
Name: HAMIL, MIKE  
Address: PO BOX 38 - 7690 POINSETTA AVE  
City-St-Zip: ALTURAS, FL 33820

Title: T ( ) Delete  
Name: LUNA, TONY  
Address: POB 38-7680 POINSETTIA AVE  
City-St-Zip: ALTURAS, FL 33820

Title: T ( ) Delete  
Name: HIELSCHER, RAYMURL  
Address: POB 38-7690 POINSETTIA AVE  
City-St-Zip: ALTURAS, FL 33820

Title: P ( ) Delete  
Name: MAYNARD, PAUL  
Address: POB 38-7690 POINSETTA AVE  
City-St-Zip: ALTURAS, FL 33820

Title: VP ( ) Delete  
Name: HIELSCHER, CARL  
Address: POB 38-7690 POINSETTA AVE  
City-St-Zip: ALTURAS, FL 33820

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: HAMMOND, VICKI  
Address: POB 38-7680 POINSETTIA AVE  
City-St-Zip: ALTURAS, FL 33820

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: RAYMURL HIELSCHER

TREA

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date