2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000763

FILED Jan 06, 2009 Secretary of State

Entity Name: FOREST PARK BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

796 20TH AVE

VERO BEACH, FL 32962

Current Mailing Address: New Mailing Address:

796 20TH AVE

VERO BEACH, FL 32962

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

MACE, PAUL 796 20TH AVE.

VERO BEACH, FL 32962 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DT () Delete Title: DT (X) Change() Addition

 Name:
 SOCTHE, PAUL
 Name:
 SOETHE, PAUL

 Address:
 2155 34TH AVE
 Address:
 2155 34TH AVE

City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32960

Title: DP () Delete Title: () Change () Addition

 Name:
 SOETHE, DIANNE
 Name:

 Address:
 2155 34TH AVE
 Address:

 City-St-Zip:
 VERO BEACH, FL 32960
 City-St-Zip:

Title: DS () Delete Title: DS (X) Change () Addition

 Name:
 KARIE, STEFANIE
 Name:
 KARIE, STEFANACCI

 Address:
 3325 ATLANTIC BLVD
 Address:
 3325 ATLANTIC BLVD

 City-St-Zip:
 VERO BEACH, FL 32960
 City-St-Zip:
 VERO BEACH, FL 32960

Title: DV () Delete Title: () Change () Addition

 Name:
 BOWLES, DAN
 Name:

 Address:
 3225 3RD PL
 Address:

 City-St-Zip:
 VERO BEACH, FL 32968
 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: KARIE STEFANACCI SECR 01/06/2009