

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001820

FILED
Feb 21, 2009
Secretary of State

Entity Name: LIBERTY CHURCH, INC OF WASHINGTON COUNTY

Current Principal Place of Business:

3983 CREEK RD.
VERNON, FL 32462 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 849
VERNON, FL 32462 US

New Mailing Address:

FEI Number: 59-3392484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYETT, DENNIS R
3595 EVANS ROAD
VERNON, FL 32462 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: D () Delete
Name: REUPKE, JERRY
Address: 3221 BOONE DR
City-St-Zip: VERNON, FL 32462

Title: D () Delete
Name: CLIFTON, MORRELL
Address: POB 135
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D () Delete
Name: WORLET, BILL
Address: 3982 CREEK RD
City-St-Zip: VERNON, FL 32462

Title: ST () Delete
Name: MARRELL, CHRISTINE
Address: PO BOX 135
City-St-Zip: VERNON, FL 32462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: WORLEY, BILL
Address: 3982 CREEK RD
City-St-Zip: VERNON, FL 32462

Title: ST (X) Change () Addition
Name: MORRELL, CHRISTINE
Address: PO BOX 135
City-St-Zip: VERNON, FL 32462

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: CHRISTINE MORRELL

ST

02/21/2009

Electronic Signature of Signing Officer or Director

Date