

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005309

FILED
Apr 17, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF MAXVILLE, INC.

Current Principal Place of Business:

8635 MAXVILLE BOULEVARD
JACKSONVILLE, FL 32234

New Principal Place of Business:

Current Mailing Address:

8635 MAXVILLE BOULEVARD
JACKSONVILLE, FL 32234

New Mailing Address:

FEI Number: 59-3432324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COVERDALE, DAVE
8635 MAXVILLE BLVD.
JACKSONVILLE, FL 32234 US

Name and Address of New Registered Agent:

CRENSHAW, BEN
18107 PENNSYLVANIA AVENUE
JACKSONVILLE, FL 32234 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: BEN CRENSHAW

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRIFFIS, HENRY
Address: 8625 MAGNOLIA ST.
City-St-Zip: JACKSONVILLE, FL 32234

Title: VD () Delete
Name: COVERDALE, DAVE
Address: 306 NORTH ROAD
City-St-Zip: JACKSONVILLE, FL 32234

Title: TD () Delete
Name: COLEMAN, DONALD F
Address: 20199 NORMANDY BLVD.
City-St-Zip: JACKSONVILLE, FL 32234

Title: D () Delete
Name: HIGGINBOTHAM, DOROTHY
Address: 18257 FLORIDA AVENUE
City-St-Zip: JACKSONVILLE, FL 32234

Title: D () Delete
Name: NOLAN, SYLVIA
Address: 8635 MAXVILLE BLVD.
City-St-Zip: JACKSONVILLE, FL 32234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRIFFIS, HENRY
Address: 8625 MAGNOLIA ST.
City-St-Zip: JACKSONVILLE, FL 32234

Title: VP (X) Change () Addition
Name: CRENSHAW, BEN
Address: 18107 PENNSYLVANIA AVENUE
City-St-Zip: JACKSONVILLE, FL 32234

Title: T (X) Change () Addition
Name: COLEMAN, DONALD F
Address: 20199 NORMANDY BLVD.
City-St-Zip: JACKSONVILLE, FL 32234

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: BEN CRENSHAW

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date