

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006199

FILED
Feb 17, 2009
Secretary of State

Entity Name: VOLUSIA COUNTY BAPTIST CHURCH, INC.

Current Principal Place of Business:

261 S ORANGE AVE
ORANGE CITY, FL 32763 US

New Principal Place of Business:

Current Mailing Address:

261 S ORANGE AVE
ORANGE CITY, FL 32763 US

New Mailing Address:

FEI Number: 59-3417040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUER, KIRK T
225 SO WOODLAND BLVD.
DELAND, FL 32720 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: DP () Delete
Name: REYNOLDS, JOHN
Address: 2991 CONYERS CT
City-St-Zip: DELTONA, FL 32738

Title: VPD () Delete
Name: SIERS, MARK
Address: 318 SECRETARIAT CT
City-St-Zip: DELAND, FL 32724

Title: DT () Delete
Name: PRESCOTT, CHARLES
Address: 108 BRADWICK CIR
City-St-Zip: DEBARY, FL 32713

Title: DS () Delete
Name: LEATHERWOOD, ROBERT M
Address: 1362 BARRINGTON DR.
City-St-Zip: HOSCHTON, GA 30548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: REYNOLDS, JOHN
Address: 2991 ALTOONA LANE
City-St-Zip: DELTONA, FL 32738

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: MARK SIERS

VPD

02/17/2009

Electronic Signature of Signing Officer or Director

Date