2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001774

Entity Name: BERRYDALE BAPTIST CHURCH, INC.

FILED Apr 27, 2009 Secretary of State

6730 HIGHWAY 4 JAY, FL 32565

Current Mailing Address: New Mailing Address:

6730 HIGHWAY 4 JAY, FL 32565

FEI Number: 59-3134243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOOMES, MICHEAL C 6730 HWY 4 JAY, FL 32565 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:

Title:V() DeleteTitle:T(X) Change () AdditionName:REEDER, JOHN DName:REEDER, JOHN DAddress:4390 REEDER RD.Address:4390 REEDER RD.

 City-St-Zip:
 JAY, FL 32565
 City-St-Zip:
 JAY, FL 32565

 Title:
 D
 () Delete
 Title:
 T
 (X) Change () Addition

 Title:
 D
 () Delete
 Title:
 T
 (X)

 Name:
 GENE, ELLIS
 Name:
 GENE, ELLIS

 Address:
 6785 ELLIS RD.
 Address:
 6785 ELLIS RD.

 City-St-Zip:
 JAY, FL 32565
 City-St-Zip:
 JAY, FL 32565

Title: P () Delete Title: T (X) Change () Addition Name: WADE, RONALD Name: WADE, RONALD

 Address:
 12664 HWY 87 NORTH
 Address:
 12664 HWY 87 NORTH

 City-St-Zip:
 MILTON, FL 32570
 City-St-Zip:
 MILTON, FL 32570

Title: D () Delete Title: P (X) Change () Addition

 Name:
 ROWELL, ROGER
 Name:
 ROBERTS, A T II

 Address:
 LEWIS ROAD
 Address:
 4036 FAWNDALE DR

 City-St-Zip:
 MILTON, FL 32570
 City-St-Zip:
 JAY, FL 32565

 Name:
 CASSADY, DÓN
 Name:
 NELSON, KEVÍN W

 Address:
 6561 D E LOVETT RD
 Address:
 6895 LOGAN LN

 City-St-Zip:
 MILTON, FL 32570
 City-St-Zip:
 JAY, FL 32565

Title: S/T () Delete Title: ST (X) Change () Addition Name: HOOMES, MICHEAL C Name: HOOMES, MICHEAL C Address: 6900 ARTHUR ROWELL ROAD 6900 ARTHUR ROWELL ROAD

City-St-Zip: JAY, FL 32565 City-St-Zip: JAY, FL 32565

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: MICHEAL C HOOMES ST 04/27/2009