## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000002174

FILED Jun 22, 2009 Secretary of State

Entity Name: PALM COAST BAPTIST CHURCH, INC.

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

5435 BELLE TERRE PKWY. PALM COAST, FL 32137 US

Current Mailing Address: New Mailing Address:

P.O. BOX 352415 PALM COAST, FL 32135

FEI Number: 59-3439613 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PETERS, GREGORY C

14 WHITE FEATHER LN

5435 BELLE TERRE PARKWAY

14 WHITE FEATHER LN 5435 BELLE TERRE PARKWAY PALM COAST, FL 32164 US PALM COAST, FL 32137 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: 06/22/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PETERS, GREGORY C Name: PETERS, GREGORY C Address: 14 WHITE FEATHER LANE Address: 5435 BELLE TERRE PARKWAY City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32137

Title: STTR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JUDD, GARY R
 Name:

 Address:
 539 QUINNVILLE DR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32221
 City-St-Zip:

Title: VTR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SHOEMAKER, CHARLES T
 Name:

 Address:
 10482 HAMLET TERRACE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32221
 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: GREGORY C. PETERS PD 06/22/2009