

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# N97000002900

Entity Name: FIRST BAPTIST CHURCH OF APALACHICOLA, FLORIDA, INC., A NONPROFIT FLORIDA CORPORATION

Current Principal Place of Business:

46 9TH STREET
APALACHICOLA, FL 32320

New Principal Place of Business:

Current Mailing Address:

46 9TH STREET
APALACHICOLA, FL 32320

New Mailing Address:

FEI Number: 59-2182368 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, RICHARD B
103 21ST AVE
APALACHICOLA, FL 32320 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: PTD () Delete
Name: WHITE, RICHARD B
Address: 103 21ST AVE
City-St-Zip: APALACHICOLA, FL 32320

Title: VD () Delete
Name: MEDLEY, OSCAR
Address: 110 SQUIRE RD
City-St-Zip: APALACHICOLA, FL 32320

Title: S () Delete
Name: WHITE, MARJORIE C CLERK
Address: 103 21ST AVENUE
City-St-Zip: APALACHICOLA, FL 32320

Title: D () Delete
Name: KEMBRO, GREGORY G
Address: 1570 LINDEN ROAD
City-St-Zip: APALACHICOLA, FL 32320

Title: D () Delete
Name: GRIFFIN, LARRY
Address: 981 WYLONDA AVENUE
City-St-Zip: EASTPOINT, FL 32328

Title: D () Delete
Name: VANVLEET, LOUIS
Address: 96 AVE D
City-St-Zip: APALACHICOLA, FL 32320

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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: RICHARD B. WHITE

PTD

01/09/2009

Electronic Signature of Signing Officer or Director

_____ Date