

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006564

FILED
Jun 25, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF FREEPORT, FLORIDA, INC.

Current Principal Place of Business:

430 KYLEA LAIRD DRIVE
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

P O BOX 92
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 59-1738911 **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:

FARRINGTON, GEORGE
3030 HWY 20 E
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

HELMS, MORRIS C
424 WHITFIELD RD.
FREEPORT, FL 32439 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: MORRIS C, HELMS

06/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FARRINGTON, GEORGE
Address: 3030 HWY. 20 EAST
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: RENTZ, AUBREY
Address: 1164 BAY GROVE ROAD
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: BENNETT, WILLIAM E
Address: 115 WESTERN STREET
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: HELMS, MORRIS C
Address: 424 WHITFIELD ROAD
City-St-Zip: FREEPORT, FL 32439

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COOPER, RALPH
Address: 3749 J.W. HOLLINGTON RD.
City-St-Zip: FREEPORT, FL 32439

Title: D (X) Change () Addition
Name: IVERSTINE, JOHN
Address: 228 WEED PATCH DR.
City-St-Zip: FREEPORT, FL 32439

Title: D (X) Change () Addition
Name: SAMUELS, ROBERT
Address: 729 EARL GODWIN RD.
City-St-Zip: FREEPORT, FL 32439

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: MORRIS C. HELMS

RA

06/25/2009

Electronic Signature of Signing Officer or Director

Date