

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001166

FILED  
May 04, 2009  
Secretary of State

**Entity Name:** SPRING WARRIOR CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

7432 S. RED PADGETT ROAD  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

7432 S. RED PADGETT ROAD  
PERRY, FL 32347

**New Mailing Address:**

**FEI Number:** 59-3525860      **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:**

BLUE & BYERS, PLLC  
115 WEST BAY ST  
PERRY, FL 32347 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: D ( ) Delete  
Name: BETHEA, NATHAN A  
Address: 12177 RADCLIFF RD  
City-St-Zip: PERRY, FL 32347

Title: D ( ) Delete  
Name: BAKER, RANDY  
Address: 808 SOUTHWOOD DRIVE  
City-St-Zip: PERRY, FL 32348

Title: D ( ) Delete  
Name: WILES, BILLY R  
Address: 4450 BETHEA RD.  
City-St-Zip: PERRY, FL 32347

Title: D ( ) Delete  
Name: MIXON, ROBERT S  
Address: 2363 MORGAN WHIDDON ROAD  
City-St-Zip: PERRY, FL 32347

**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  
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: SCOTT MIXON

TREA

05/04/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date