

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001501

**FILED**  
**Aug 03, 2010**  
**Secretary of State**

**Entity Name:** FELLOWSHIP BAPTIST CHURCH OF RAIFORD, INC.

**Current Principal Place of Business:**

HWY. 121, P. O. BOX 338  
RAIFORD, FL 32083

**New Principal Place of Business:**

HWY. 121, P. O. BOX 338  
RAIFORD, FL 32083 US

**Current Mailing Address:**

HWY. 121, P. O. BOX 338  
RAIFORD, FL 32083

**New Mailing Address:**

HWY. 121, P. O. BOX 338  
RAIFORD, FL 32083 US

**FEI Number:** 59-2624700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COOPER, JOHN S  
100 W. CALL ST.  
STARKE, FL 32091 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  
Name: GRIFFIS, GERALD  
Address: P. O. BOX 494  
City-St-Zip: RAIFORD, FL 32083 US

Title: T  
Name: NORMAN, LINDA  
Address: P.O. BOX 310  
City-St-Zip: WORTHINGTON SPRINGS, FL 32697 US

Title: C  
Name: SINGLETARY, GENA  
Address: P.O. BOX 44  
City-St-Zip: RAIFORD, FL 32083 US

Title: D  
Name: SINGLETARY, ROY  
Address: P. O. BOX 44  
City-St-Zip: RAIFORD, FL 32083 US

I hereby 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 all other like empowered.

SIGNATURE: LINDA NORMAN

T

08/03/2010

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

\_\_\_\_\_ Date