

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740224

**FILED**  
**Apr 14, 2014**  
**Secretary of State**  
**CC8411918707**

**Entity Name:** OAK AVENUE BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

404 N. OAK AVENUE  
FLORAHOME, FL 32140

**Current Mailing Address:**

404 N. OAK AVENUE  
FLORAHOME, FL 32140

**FEI Number:** 59-3256332

**Certificate of Status Desired:** No

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

UNDERWOOD, LORI E  
404 N. OAK AVENUE  
FLORAHOME, FL 32140 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:** LORI E. UNDERWOOD

04/14/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name UNDERWOOD, LORI E.  
Address 404 N. OAK AVENUE  
City-State-Zip: FLORAHOME FL 32140

Title TREASURER  
Name MERRITT, BRENDA M  
Address 404 N. OAK AVENUE  
City-State-Zip: FLORAHOME FL 32140

Title D  
Name PEAGLER, AUDREY  
Address 581 HILLSBOROUGH AVE  
City-State-Zip: FLORAHOME FL 32140

Title D  
Name HARPER, RAYMON  
Address 403 N PINE ST  
City-State-Zip: FLORAHOME FL 32140

Title D  
Name BOSLEY, EARL  
Address 321 LINEWAY  
City-State-Zip: INTERLACHEN FL 32148

Title PRESIDENT  
Name BRADLEY, BARBARA  
Address 404 N. OAK AVENUE  
City-State-Zip: FLORAHOME FL 32140

*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:** LORI E. UNDERWOOD

**SECRETARY**

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date