

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000000197

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC9686157989**

**Entity Name:** THE BAPTIST FOUNDATION OF ALABAMA INCORPORATED

**Current Principal Place of Business:**

7650 HALCYON SUMMIT DRIVE  
MONTGOMERY, AL 36117

**Current Mailing Address:**

P.O. BOX 241227  
MONTGOMERY, AL 36124

**FEI Number: 63-0519158**

**Certificate of Status Desired: No**

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

MCCLELLAND, EDDIE L  
1320 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207-8621 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PT  
Name BLEDSOE, BARRY  
Address 7132 PINECREST  
City-State-Zip: MONTGOMERY AL 36117

Title CHIEF DEVELOPMENT OFFICER  
Name BLEDSOE, JAMES R  
Address 9719 IVY GREEN DRIVE  
City-State-Zip: MONTGOMERY AL 36117

Title CFO  
Name OGBURN, JENNIFER H  
Address 250 CULPEPPER ROAD  
City-State-Zip: ECLECTIC AL 36024

Title VTO  
Name SMITH, PAULA K  
Address 30 JASMINE HOLLOW ROAD  
City-State-Zip: WETUMPKA AL 36093

Title VP MINISTRY  
Name RANDALL, J. THOMAS  
Address 822 BRIDLEWAY CT.  
City-State-Zip: PIKE ROAD AL 36064

Title VP-CHURCH RELATIONS  
Name MCCRARY, WILLIAM M  
Address 3113 WHITNEY DR.  
City-State-Zip: MONTGOMERY AL 36106

Title INVESTMENT OFFICER  
Name MCCARTHY, NATHAN R  
Address 3011 BOXWOOD DR  
City-State-Zip: MONTGOMERY AL 36111

Title CHIEF ADMINISTRATIVE OFFICER  
Name ASHWORTH, JOHN  
Address 2226 COUNTRY CLUB DR.  
City-State-Zip: MONTGOMERY AL 36106

**Continues on page 2**

*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: BARRY BLEDSOE**

**PRESIDENT**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DEVELOPMENT OFFICER  
Name HOCUTT, II, JOSEPH N  
Address 11534 BUSHWICK DRIVE  
City-State-Zip: NORTHPORT AL 35475