

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000197

FILED
Jan 05, 2009
Secretary of State

Entity Name: THE BAPTIST FOUNDATION OF ALABAMA INCORPORATED

Current Principal Place of Business:

7650 HALCYON SUMMIT DRIVE
MONTGOMERY, AL 36117

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 241227
MONTGOMERY, AL 36124

New Mailing Address:

FEI Number: 63-0519158 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLELLAND, EDDIE L
1320 HENDRICKS AVENUE
JACKSONVILLE, FL 322078621 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: PT () Delete
Name: BLEDSOE, BARRY
Address: 7132 PINECREST
City-St-Zip: MONTGOMERY, AL 36117

Title: V () Delete
Name: DRIGGERS, JAMES R
Address: 1079 FAWNVIEW RD.
City-St-Zip: MONTGOMERY, AL 36117

Title: VCO () Delete
Name: OGBURN, JENNIFER H
Address: 250 CULPEPPER ROAD
City-St-Zip: ECLECTIC, AL 36024

Title: VTO () Delete
Name: SMITH, PAULA K
Address: 30 JASMINE HOLLOW ROAD
City-St-Zip: WETUMPKA, AL 36093

Title: V () Delete
Name: RANDALL, J. THOMAS
Address: 822 BRIDLEWAY CT.
City-St-Zip: PIKE ROAD, AL 36064

Title: V () Delete
Name: KING, GEORGE B
Address: 202 WINCHESER WAY
City-St-Zip: PRATTVILLE, AL 36067

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:

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Title: () Change () Addition
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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: BARRY BLEDSOE

PT

01/05/2009

Electronic Signature of Signing Officer or Director

_____ Date