

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001654

FILED  
May 25, 2010  
Secretary of State

**Entity Name:** OAK HILL BAPTIST CHURCH OF LOUGHMAN, INC.

**Current Principal Place of Business:**

8060 OSCEOLA-POLK LINE ROAD  
LOUGHMAN, FL 33858

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 112  
LOUGHMAN, FL 33858

**New Mailing Address:**

**FEI Number:** 59-3425981      **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:**

GRINSTEAD, RICKY L  
8060 OSCEOLA-POLK LINE ROAD  
LOUGHMAN, FL 33858      US

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

GLISSON, ZOLLIE  
8060 OSCEOLA-POLK LINE ROAD  
LOUGHMAN, FL 33858      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: ZOLLIE GLISSON

05/25/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: TRAVIS, SHERON  
Address: 1907 COUNTY ROAD 547 N  
City-St-Zip: DAVENPORT, FL 33837

Title: T  
Name: REYNOLDS, CATHY  
Address: 3049 COUNTY ROAD 547 NORTH  
City-St-Zip: DAVENPORT, FL 33837

Title: DC  
Name: GLISSON, ZOLLIE  
Address: P.O.BOX 97  
City-St-Zip: DAVENPORT, FL 33837 US

Title: D  
Name: REYNOLDS, CHARLIE  
Address: 3041 COUNTY ROAD 547 NORTH  
City-St-Zip: DAVENPORT, FL 33837 US

Title: D  
Name: DUNN, BOBBY  
Address: 11751 DEEN STILL RD E.  
City-St-Zip: POLK CITY, FL 33868

Title: D  
Name: HANCOCK, J.D.  
Address: 1711 COUNTY RD 547 N  
City-St-Zip: DAVENPORT, FL 33837

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: CATHY REYNOLDS

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05/25/2010

Electronic Signature of Signing Officer or Director

Date