## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 732726** 

FILED Apr 07, 2009 Secretary of State

Entity Name: DUNNELLON PRESBYTERIAN CHURCH INC

Entity Nai	me: DUNNELL	ON PRESBYTERIAN CHURC	H, INC.			
Current Principal Place of Business:			New Principal Place of Business:			
	ESTNUT ST. .ON, FL 34431	US				
Current M	lailing Address	<b>::</b>	New Mailing Address:			
	ESTNUT ST. .ON, FL 34431	US				
FEI Number: 59-1786379 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )				
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New	Registered Agent:	
20641 CHI	JEFFREY W RE ESTNUT ST .ON, FL 34431	V US				
The above in the State	e named entity si e of Florida.	ubmits this statement for the p	urpose of changing i	ts registered office	or registered agent, or	both,
SIGNATU	RE:					
	Electroni	c Signature of Registered Age	nt		Date	
OFFICER	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	TR () HENDRIX, MARC 11875 BLUE CO DUNNELLON, FL	VE DRIVE	Title: Name: Address: City-St-Zip:	TR (X) Char LOOMIS, JAMES A 21720 SW 87TH LOO DUNNELLON, FL 34		
Title: Name: Address: City-St-Zip:	VP () I LAPP, LISA ANN 9075SW 101LAN OCALA, FL 344	NE	Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC () Delete LORD, RENEE P 8150 SW 209 COURT ROAD DUNNELLON, FL 34431		Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition	
Title: Name: Address: City-St-Zip:	PRES ()  CHURCH, HUGH 19574 SW 84TH DUNNELLON, FL	PLACE	Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition	

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: JAMES A LOOMIS TR 04/07/2009