

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758585

FILED
Apr 30, 2009
Secretary of State

Entity Name: LIGHT OF CHRIST COMMUNITY CHURCH, INC.

Current Principal Place of Business:

22 SUMMIT RIDGE RD
TAHLEQUAH, OK 74464

New Principal Place of Business:

Current Mailing Address:

22 SUMMIT RIDGE DRIVE
TAHLEQUAH, OK 74464

New Mailing Address:

FEI Number: 73-1135021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANKINS, EMMA DOROTHEA
3809 BRIARBROOK PLACE
LAND O'LAKES, FL 346394867 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: PD () Delete
Name: PARRISH-HARRA, CAROL E
Address: 101 SUMMIT RIDGE DRIVE
City-St-Zip: TAHLEQUAH, OK

Title: TD () Delete
Name: HARRA, CHARLES C
Address: 101 SUMMIT RIDGE
City-St-Zip: TAHLEQUAH, OK

Title: S () Delete
Name: OLIVER, LINDA
Address: 206 SUMMIT RIDGE DR
City-St-Zip: TAHLEQUAH, OK 74464

Title: D () Delete
Name: SIMOTA, THOMAS
Address: 2335 STEWART AVE, APT 316
City-St-Zip: SAINT PAUL, MN 551163062

Title: D () Delete
Name: GROSSHEIM, JO
Address: 6 FORREST TRL
City-St-Zip: FAIRFIELD, PA 17320

Title: D () Delete
Name: CROSS, REGINA
Address: 110 WILSON CLARK LANE
City-St-Zip: CENTREVILLE, MD 21617

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:

Title: D (X) Change () Addition
Name: SIMOTA, THOMAS
Address: 2212 OAKWOOD AVE.
City-St-Zip: BENTONVILLE, AR 72712

Title: D (X) Change () Addition
Name: ZAKUTANSKY, M. KATHERINE
Address: 4216 MENOMONEE RV. PARKWAY
City-St-Zip: WAUWATOSA, WI 53222

Title: D (X) Change () Addition
Name: WEISER, HELEN
Address: 12611 OAKMONT DR.
City-St-Zip: KANSAS CITY, MO 64145

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: LINDA OLIVER

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04/30/2009

Electronic Signature of Signing Officer or Director

Date