

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760824

FILED
Jul 07, 2008
Secretary of State

Entity Name: COUNTRYSIDE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1850 MCMULLEN BOOTH
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

1850 MCMULLEN BOOTH
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 59-2167973 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:

LLOYD, JOHN A
2901 EAGLE ESTATES CIR S
CLEARWATER, FL 33761 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: CD () Delete
Name: MITCHELL, MARK
Address: 3037 WOODSONG LN
City-St-Zip: CLEARWATER, FL 33761

Title: PD () Delete
Name: PEARSON, KENNETH
Address: 3213 GLENRIDGE CT
City-St-Zip: PALM HARBOR, FL 346851730

Title: VD () Delete
Name: PITCHON, SOL
Address: 467 BRIDLE PATH WAY
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TD () Delete
Name: STEUER, MICHAEL
Address: 2613 BELHURST DR
City-St-Zip: DUNEDIN, FL 34698

Title: DD () Delete
Name: LLOYD, JOHN
Address: 1850 MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 34619

Title: SD () Delete
Name: DAVIS, CLAYTON
Address: 360 WESTWINDS DR
City-St-Zip: PALM HARBOR, FL 34683

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: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: MICHAEL STEUER

TD

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date