

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007223

FILED
Jan 19, 2009
Secretary of State

Entity Name: VIERA CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

1352 DEER TRAIL
ROCKLEDGE, FL 32955

New Principal Place of Business:

1352 DEER TRAIL
ROCKLEDGE, FL 32955 US

Current Mailing Address:

1352 DEER TRAIL
ROCKLEDGE, FL 32955

New Mailing Address:

1352 DEER TRAIL
ROCKLEDGE, FL 32955 US

FEI Number: 59-3751654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLIFFEN, JACK
1352 DEER TRAIL
ROCKLEDGE, FL 32955 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: DP () Delete
Name: BLIFFEN, JACK
Address: 1352 DEER TRAIL
City-St-Zip: ROCKLEDGE, FL 32955

Title: DST () Delete
Name: MINTZ, LLOYD
Address: 270 MELBOURNE AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DV () Delete
Name: COOK, JESS
Address: 4290 TANGELO AVE
City-St-Zip: COCOA, FL 32926

Title: D () Delete
Name: RAY, DAVID
Address: 1407 ROCKLEDGE AVE
City-St-Zip: ROCKLEDGE, FL 32955

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: BROWN, HOWARD
Address: 555 RUTH CIRCLE
City-St-Zip: WEST MELBOURNE, FL 32904

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: JACK M. BLIFFEN

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

Date