

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

FILED  
May 08, 2007  
Secretary of State

DOCUMENT# N01255

Entity Name: CENTRAL CHURCH OF CHRIST OF LONGWOOD, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

875 OAK DR.  
ALTAMONTE SPGS., FL 327142600

**Current Mailing Address:**

**New Mailing Address:**

875 OAK DR.  
ALTAMONTE SPGS., FL 327142600

FEI Number: 59-2267528 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:**

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

WILLIAM J. SOWERS  
1000 WEST LAKE BRANTLEY RD  
ALTAMONTE SPRINGS, FL 32714 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: VEECH, R. KENT,  
Address: 221 CANTER CLUB TRL  
City-St-Zip: LONGWOOD, FL 32779

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

Title: TD ( ) Delete  
Name: SOWERS, WILLIAM J  
Address: 1000 W LK BRANTLEY ROAD  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

Title: SD ( ) Delete  
Name: CAIN, KENNETH L  
Address: 116 LEDBURY DRIVE  
City-St-Zip: LONGWOOD, FL

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: WILLIAM J. SOWERS

TD

05/08/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date