

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2008
Secretary of State**

DOCUMENT# N45633

Entity Name: PARK AVENUE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

511 S. PARK AVE
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

511 S. PARK AVE
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 59-3106105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERT L MANN
3218 SCENIC WOODS DRIVE
DELTONA, FL 32725 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: MANN, ROBERT L
Address: 3218 SCENIC WOODS DRIVE
City-St-Zip: DELTONA, FL 32725

Title: TD () Delete
Name: HALL, SIMON G
Address: 519 GILBERT STREET
City-St-Zip: TITUSVILLE, FL 32780

Title: SD () Delete
Name: WILLIAMS, THOMAS I
Address: 951 KENILWORTH COURT
City-St-Zip: TITUSVILLE, FL 32780

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:

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: ROBERT L MANN

CD

04/25/2008

Electronic Signature of Signing Officer or Director

_____ Date