## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47500

FILED Apr 25, 2009 Secretary of State

Entity Name: RIVER OF LIFE COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

3201 NE 25TH AVE OCALA, FL 344793050 US

Current Mailing Address: New Mailing Address:

P.O. BOX 830205 OCALA, FL 344830205 US

FEI Number: 59-3109167 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AMERLING, RUSSELL E REV 2360 SE 51ST AVENUE 2360 SE 51ST AVENUE OCALA, FL 344801185 US AMERLING, RUSSELL E REV 2360 SE 51ST AVENUE OCALA, FL 344801185 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: RUSSELL E AMERLING 04/25/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: MAZE, JOHN Name:

 Name:
 MAZE, JOHN
 Name:

 Address:
 2012 SE 50TH TERR
 Address:

 City-St-Zip:
 OCALA, FL 34480
 City-St-Zip:

Title: TSD () Delete Title: (X) Change ( ) Addition TSD AMERLING, RUSSELL E Name: AMERLING, RUSSELL E REV Name: Address: 2360 SE 51ST AVE Address: 2360 SE 51ST AVE City-St-Zip: OCALA, FL 344801185 City-St-Zip: OCALA, FL 344801185

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLUE, CHRIS
 Name:

 Address:
 9 PECAN PASS TRACE
 Address:

 City-St-Zip:
 OCALA, FL 34472
 City-St-Zip:

Title: D ( ) Delete Title: VPD (X) Change ( ) Addition Name: PRIEST, GUY Name: DEHART, ALAN

 Name:
 PRIEST, GUY
 Name:
 DEHART, ALAN

 Address:
 22 LARCH COURSE
 Address:
 7 ALMOND TRAIL COURT

 City-St-Zip:
 OCALA, FL 34472
 City-St-Zip:
 OCALA, FL 34472

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DEHART, ALÂN
 Name:

 Address:
 7 ALMOND TRAIL COURT
 Address:

 City-St-Zip:
 OCALA, FL 34472
 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: RUSSELL E. AMERLING S/T 04/25/2009