

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2007
Secretary of State**

DOCUMENT# N93000000679

Entity Name: THE CORNERSTONE CHURCH OF FORT PIERCE, INC.

Current Principal Place of Business:

3215 DELAWARE AVE.
FORT PIERCE, FL 34947

New Principal Place of Business:

Current Mailing Address:

2310 NEWPORT ISLE
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 65-0487666 **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:

SAINTIL, KILLICK
2310 NEWPORT ISLE
PORT SAINT LUCIE, FL 34953 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:

Title: PD () Delete
Name: SAINTIL, KILLICK
Address: 2310 NEWPORT ISLE
City-St-Zip: PORT SAINT LUCIE, FL

Title: VD () Delete
Name: SAINTIL, ROMENE
Address: 2310
City-St-Zip: PORT SAINT LUCIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KILLICK SAINTIL

VD

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date