2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 28, 2008 **DOCUMENT# 700923** Secretary of State

Entity Name: FLORIDA CONFERENCE ASSOCIATION OF SEVENTH-DAY ADVENTISTS

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

655 N WYMORE RD

WINTER PARK, FL 327891715 US

Current Mailing Address: New Mailing Address:

P. O. BOX 2626

WINTER PARK, FL 327902626 US

FEI Number: 59-6137501 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:

MCMILLAN, FRANK 655 N WYMORE RD **STE 101** WINTER PARK, FL 32789 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

LEGRAND, JOSE A Name: Name: 557 APOLLO AVE Address: Address: City-St-Zip: DELTONA, FL 32725 City-St-Zip:

Title: CPD () Delete Title: (X) Change () Addition CAULEY, MICHAEL Name: CAULEY, MICHAEL F Name:

Address: 1225 GOLF POINT LOOP Address: 1225 GOLF POINT LOOP City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712

Title: VD. () Delete Title: **VPD** (X) Change () Addition

CARTER, GLENN DUNCANSON, CYNTHIA Name: Name: 2458 CAROL WOODS WAY Address: Address: 2629 ATTLEBORO PLACE City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32703

Title: VTD () Delete Title: (X) Change () Addition JOHNSON, KIM Name: VERRILL, THOMAS L Name:

2306 WALNUT HEIGHTS RD. 2114 TORTOISE SHELL DRIVE Address: Address: City-St-Zip: APOPKA, FL 32703 US City-St-Zip: MAITLAND, FL 32751 US

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

QUALE, WESLEY ELLIOTT, ANDREW Name: Name: 209 S LAVKE CORTEZ DR 655 NORTH WYMORE ROAD Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: () Change (X) Addition ROLLINS, DUANE C Name: Name:

Address: Address: 655 NORTH WYMORE ROAD WINTER PARK, FL 32789 City-St-Zip: 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: JOSE A LEGRAND S 07/28/2008