2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# 738150

Entity Name: CALLAHAN EVANGELISTIC CENTER, INC.

Current Principal Place of Business:

613220 RIVER RD.
C
CALLAHAN, FL 32011

New Principal Place of Business:

613220 RIVER RD.
CALLAHAN, FL 32011

Current Mailing Address:

613220 RIVER RD.
C
CALLAHAN, FL 32011

New Mailing Address:

613220 RIVER ROAD
CALLAHAN, FL 32011

FEI Number: 59-1722863 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, DAVID D.
613220 RIVER RD.
CALLAHAN, FL 32011 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:	D	( ) Delete
Name:	SMITH, DAVID D JR.	
Address:	43107 SMITTY ROAD	
City-St-Zip:	CALLAHAN, FL 32011	
Title:	D	( ) Delete
Name:	SMITH, RUBY	
Address:	43227 RATCLIFF RD.	
City-St-Zip:	CALLAHAN, FL 32011	
Title:	D	( ) Delete
Name:	ARMSTRONG, MARILYN,	
Address:	450829 SR 200	
City-St-Zip:	CALLAHAN, FL 32011	
Title:	D	( ) Delete
Name:	SMITH, LESTER F.,	
Address:	613220 RIVER RD.	
City-St-Zip:	CALLAHAN, FL 32011	
Title:	D	( ) Delete
Name:	SMITH, LYNDA C,	
Address:	613220 RIVER RD.	
City-St-Zip:	CALLAHAN, FL 32011	
Title:	TP	( ) Delete
Name:	SMITH, DAVID D,	
Address:	613220 RIVER RD.	
City-St-Zip:	CALLAHAN, FL 32011	

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:	
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: REV. DAVID D. SMITH TP 01/22/2009
Electronic Signature of Signing Officer or Director — Date