

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16460

FILED
May 21, 2009
Secretary of State

Entity Name: ORMOND BEACH ALLIANCE CHURCH

Current Principal Place of Business:

55 NORTH NOVA ROAD
ORMOND BEACH, FL 321747236

New Principal Place of Business:

Current Mailing Address:

55 NORTH NOVA ROAD
ORMOND BEACH, FL 321747236

New Mailing Address:

FEI Number: 23-7371396 **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:

HOBBS, GEORGE
55 NORTH NOVA ROAD
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

HAUTZ, DOUGLAS C PASTOR
55 NORTH NOVA ROAD
ORMOND BEACH, FL 32174 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: DOUGLAS C HAUTZ

05/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOBBS, GEORGE
Address: 825 W. VICTORIA CR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD (X) Delete
Name: HAUTZ, DOUGLAS
Address: 311 GRANADA STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TD () Delete
Name: WEAVER, JANET
Address: 1310 FLEMING AVE C65
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAUTZ, DOUGLAS C PASTOR
Address: 825 W. VICTORIA CR.
City-St-Zip: ORMOND BEACH, FL 32174

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: DOUGLAS C HAUTZ

PD

05/21/2009

Electronic Signature of Signing Officer or Director

Date