2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# 700202

Entity Name: DISCOVERY CHURCH, INC.

Current Principal Place of Business:

4400 S. ORANGE AVE
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

4400 S. ORANGE AVE
ORLANDO, FL 32806 US

New Mailing Address:

FEI Number: 59-1232619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOUNT, STEPHEN
4400 S. ORANGE AVE
ORLANDO, FL 32806 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: PD ( ) Delete
Name: LOVELESS, DAVID
Address: 1108 MISSION RIDGE CT
City-St-Zip: ORLANDO, FL 32835

Title: VD ( ) Delete
Name: REX, BRAD
Address: 11518 WILLOW GARDENS DR
City-St-Zip: WINDERMERE, FL 34786

Title: S ( ) Delete
Name: SHOEMAKER, KENT
Address: 721 GEORGIA DR
City-St-Zip: WINTER PARK, FL 32789

Title: T ( ) Delete
Name: MCDIRMIT, ELDEN
Address: 4836 WATERWITCH POINT DR
City-St-Zip: ORLANDO, FL 32806 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LOVELESS, DAVID
Address: 5105 PINE TOP PLACE
City-St-Zip: ORLANDO, FL 32819

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: DAVID LOVELESS PD 01/07/2008

Electronic Signature of Signing Officer or Director — Date