

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700551

FILED
Feb 26, 2009
Secretary of State

Entity Name: NEW DAY CHRISTIAN CHURCH AT PORT CHARLOTTE, INC.

Current Principal Place of Business:

20212 PEACHLAND BLVD.
PORT CHARLOTTE, FL 33954 US

New Principal Place of Business:

Current Mailing Address:

20212 PEACHLAND BLVD.
PORT CHARLOTTE, FL 33954 US

New Mailing Address:

FEI Number: 23-7074785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOTCHKISS, GEORGE C
2161 HAYWORTH RD
PORT CHARLOTTE, FL 33952 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: BM () Delete
Name: MANNING, GEORGE III
Address: 20246 ANDOVER AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: V () Delete
Name: ROSE, WAYNE
Address: 128 S.W. LELAND ST.
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: C () Delete
Name: HOFFMAN, AL
Address: 23295 FULLERTON AVE.
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: S () Delete
Name: THRASHER, TOM
Address: 3431 BAYRIDGE WAY
City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: T () Delete
Name: ZECK, ALLEN
Address: 25500 AYSEN DR.
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: BM () Delete
Name: BORDEN, TONY
Address: 27060 CURITIBA DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

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:

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City-St-Zip:

Title: () Change () Addition
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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: THOMAS J. THRASHER

SEC.

02/26/2009

Electronic Signature of Signing Officer or Director

Date