2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702432

FILED Apr 08, 2009 Secretary of State

Entity Name: HOMESTEAD CHURCH OF CHRIST, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
17700 SW 2 HOMESTEA	280 ST AD, FL 330313:	309			
Current Mailing Address:			New Mailing Address:		
17700 SW 2 HOMESTE	280 ST AD, FL 330313:	309			
FEI Number:	59-1195180	FEI Number Applied For ()	El Number Not Appli	icable () Certificate of Status Desire	d ()
Name and	Address of Cu	rrent Registered Agent:	Name and Address of New Registered Agent:		
820-I N. FR.	N, ORLANDO E ANKLIN AVE. AD, FL 33034	SSR. US			
The above r	named entity su of Florida.	bmits this statement for the purpo	ose of changing its	ts registered office or registered agent,	or both,
SIGNATUR		Oissanting of Designation I Assert		Dete	
05510500		Signature of Registered Agent	ADDITION	Date	SECTOR:
OFFICERS	AND DIRECTO	UKS:	ADDITION	S/CHANGES TO OFFICERS AND DIF	(ECTORS:
Title: Name:	SD ()D		Title: Name:	()Change ()Addition	
Address:	THOMPSON, ORI 820-I N. FRANKLI		Address:		
City-St-Zip:	HOMESTEAD, FL		City-St-Zip:		
Title:	V ()D	velete	Title:	() Change () Addition	
Name:	SUGGS, JERRY		Name:	() cgc () /	
Address:	16835 SW 192 S	TREET	Address:		
City-St-Zip:	MIAMI, FL 33187	•	City-St-Zip:		
Title:	TD ()D	elete	Title:	() Change () Addition	
Name:	WALDBILLIG, TH	EODORE W	Name:		
Address:	16940 SW 176 S		Address:		
City-St-Zip:	HOMESTEAD, FL	33031	City-St-Zip:		
Title:	PD ()D	elete	Title:	PD (X) Change () Addition	
Name:	LARUE, BILL		Name:	PREWITT, LOWELL	
Address:	25100 SW 129 PI		Address:	1691 NW 8TH STREET	
City-St-Zip:	HOMESTEAD, FL	33032	City-St-Zip:	HOMESTEAD, FL 33030	

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: THEODORE W. WALDBILLIG TD 04/08/2009