

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702542

FILED
Jan 20, 2009
Secretary of State

Entity Name: LARGO ALLIANCE CHURCH OF THE CHRISTIAN AND MISSIONARY ALLIANCE, INC.

Current Principal Place of Business:

1633 LAKE AVE NE
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

1633 LAKE AVE NE
LARGO, FL 33771 US

New Mailing Address:

FEI Number: 59-6202750 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HACKETT, KEVIN P
1071 LAKE AVE NE
LARGO, FL 33771 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: BOTBYL, DON REV.
Address: 1845 S HIGHLAND AVE BLDG 9 APT 1
City-St-Zip: CLEARWATER, FL 33756

Title: T () Delete
Name: DAMANN, KRIS
Address: 8742 95 TERR N
City-St-Zip: LARGO, FL 33777

Title: S () Delete
Name: CONWAY, LARREN
Address: 1705 WOODRIDGE DR.
City-St-Zip: CLEARWATER, FL 33756

Title: T () Delete
Name: PIWONKA, BARBARA
Address: 7853 SUNDOWN DR.
City-St-Zip: ST. PETERSBURG, FL 33709

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:

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: KRIS DAMANN

T

01/20/2009

Electronic Signature of Signing Officer or Director

Date