2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703382

FILED Feb 17, 2009 Secretary of State

Entity Name: MOUNT DORA COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 650 N DONNELLY ST MOUNT DORA, FL 32757 US **Current Mailing Address: New Mailing Address:** 650 N. DONNELLY ST MOUNT DORA, FL 32757 US FEI Number: 59-6140982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KARR, NORMAN W. 2136 TOPPING PLACE EUSTIS, FL 32735 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete KARR, NORMAN DONNELLY, JAMES Name: Name: 2136 TOPPING PLACE Address: 3209 VICTORIA LANE

Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: EUSTIS, FL 32726 Title: Title: (X) Change () Addition () Delete FURNACE, STEVE Name: ROSS, DAVID Name: Address: 36523 SUNDANCE DR Address: 416 E 9TH AVENUE City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: MOUNT DORA, FL 32757 Title: () Delete Title: () Change () Addition ROSS, HELEN Name: Name: 36523 SUNDANCE DR Address: Address: City-St-Zip: GRAND ISLAND, FL 32735 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PAMELA, WRAY Name: 2110 OAK CIRCLE Address: Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: () Delete Title: () Change () Addition THUNBERG, DORIS Name: Name: 1624 NEW ABBEY AVENUE Address: Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: Title: () Delete Title: (X) Change () Addition FURNACE, STEVE GRANT STEVE Name: Name: Address: 416 E. 9TH AVENUE E Address: 1705 IMPERIAL PALM DRIVE MOUNT DORA, FL 32757 APOPKA, FL 32712 City-St-Zip: 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: HELEN ROSS TREA 02/17/2009