## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 704125** 

FILED Jan 07, 2009 Secretary of State

Entity Name: BELLE GLADE CHURCH OF CHRIST PROPERTIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

125 NW AVENUE D

BELLE GLADE, FL 33430 LIS

**Current Mailing Address: New Mailing Address:** 

125 NW AVENUE D

BELLE GLADE, FL 33430 US

FEI Number: 65-0064171 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:

MARSICANO, RUDOLPH MARSICANO, RUDOLPH 1433 NW F PL 1433 NW F PL

BELLE GLADE, FL 33430 BELLE GLADE, FL 33430 US US

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: RUDOLPH MARSICANO 01/07/2009

> Electronic Signature of Registered Agent Date

> > Name:

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VD () Delete (X) Change ( ) Addition

COPEN, GARY COPEN, GARY 18 NE AVENUE F Address: 18 NE AVENUE F Address: City-St-Zip: BELLE GLADE, FL City-St-Zip: BELLE GLADE, FL 33430

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition

PRIEST,A, Name: PRIEST, ALFRED T Name: Address: 157 N E 3 STREET Address: 157 N E 3 STREET City-St-Zip: BELLE GLADE, FL City-St-Zip: BELLE GLADE, FL 33430

Title: () Delete Title: (X) Change ( ) Addition HUNTER, KENZIE L. HUNTER, KENZIE L Name: Name:

917 SW AVE G. PL Address: Address: 917 SW AVE G. PL City-St-Zip: BELLE GLADE, FL City-St-Zip: BELLE GLADE, FL 33430

( ) Delete Title: PD Title: PD (X) Change ( ) Addition

MARSICANO, RUDOLPH Name: Name: MARSICANO, RUDOLPH 1433 NW F PL Address: Address: 1433 NW F PL

City-St-Zip: BELLE GLADE, FL City-St-Zip: BELLE GLADE, FL 33430

Title: () Delete Title: () Change () Addition PELHAM, JOHN Name: Name:

101 4TH STREET Address: Address: City-St-Zip: CANAL POINT, FL 33438 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: ALFRED T PRIEST STD 01/07/2009