


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2008 08:00 AM
Secretary of State

DOCUMENT # 704157 1. Entity Name FIRST CHRISTIAN CHURCH OF BRANDON, FLORIDA, INC.	
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Principal Place of Business 1720 ST. CLOUD AVE. VALRICO, FL 33594	Mailing Address 1720 ST. CLOUD AVE. VALRICO, FL 33594
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent LOPRESTI, NICHOLAS J 10108 BELL CREEK DR. RIVERVIEW, FL 33569	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD LOPRESTI, NICK 10108 BELL CREEK DRIVE RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALLEN, JAMES 2705 HERNDON CT VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STEVENS, FRANK 502 SHAMOCK RD. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HEFNER, DANIEL 1502 N. TAYLOR ROAD BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/18/08-80037-004 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **01-06-08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #