2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# 704157

Entity Name: FIRST CHRISTIAN CHURCH OF BRANDON, FLORIDA, INC.

Current Principal Place of Business:

1720 ST. CLOUD AVE.
VALRICO, FL 33594

New Principal Place of Business:

1720 S SAINT CLOUD AVE.
VALRICO, FL 33594

Current Mailing Address:

1720 ST. CLOUD AVE.
VALRICO, FL 33594

New Mailing Address:

1720 S SAINT CLOUD AVE.
VALRICO, FL 33594

FEI Number: 59-1888849 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOPRESTI, NICHOLAS J
10108 BELL CREEK DR.
RIVERVIEW, FL 33569 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: CD ( ) Delete
Name: LOPRESTI, NICK
Address: 10108 BELL CREEK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: TD ( ) Delete
Name: ALLEN, JAMES
Address: 2705 HERNDON CT
City-St-Zip: VALRICO, FL 33594

Title: VD ( ) Delete
Name: STEVENS, FRANK
Address: 502 SHAMOCK RD.
City-St-Zip: BRANDON, FL 33511

Title: SD ( ) Delete
Name: HEFNER, DANIEL
Address: 1502 N. TAYLOR ROAD
City-St-Zip: BRANDON, FL 33510

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: FRANK STEVENS #3 04/25/2009
Electronic Signature of Signing Officer or Director — Date