2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Jan 18, 2008 08:00 AM
Secretary of State

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1. Entity Name

REFORMED COMMUNITY CHURCH, INC.



Principal Place of Business

Mailing Address

1600 BANYAN DRIVE VENICE, FL 34293 1600 BANYAN DRIVE VENICE, FL 34293



01102008 No Chg-NP

CR2E037 (4/06)

4. FEI Number		Applied For
59-2120485		Not Applicable
5. Certificate of Status Desired	\$8.75	5 Additional

6. Name and Address of Current Registered Agent

BUSKER, NEAL 268 INNER DR VENICE, FL 34285 DO NOT WRITE IN THIS SPACE

 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, i in the State of Florida. I am familiar with, and accept the obligations of registered agent. 						
SIGNATURE Signature, typed or printed name of registered agent and title	il applicable (NOTE: Registered Agen	l signalure	required when reinstating)	DATE	-	
Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees			

10.	OFFICERS AND DIRECTORS
NAME STREET ADDRESS CHY-ST-ZIP	P BUSKER, NEAL 268 INNER DR VENICE, FL 34285
IIILE NAME STREET ADDRESS CITY-ST-ZIP	VD SEPTER, DONALD 18158 BRACKEN COURT PORT CHARLOTTE, FL 33948
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DE HAVEN, JANE 1851 ENGLEWOOD RD VENICE, FL 34293
TITLE NAME STREET ADDRESS CITY+ST+ZIP	TD DEHAVEN, JANE 1851 ENGLEWOOD RD VENICE, FL 34293
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CLARK, BETTY 516 SHAMROCK BLVD VENICE, FL 34293
TITLE NAME STREET ADDRESS CHY-ST-ZIP	SD CLARK, BETTY 516 SHAMROCK BLVD VENICE, FL 34293

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statute s 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: an of that my name appears in Block 10 or Block 11 if that my name appears in Block 10 or Block 11 if the exemptions contained in Chapter 119, Florida Statute s 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 in 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 in 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 Statute is I further certify that the information indicated in the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of t

SIGNATURE: Pulled Busher PRINTED HAME OF SIGNING OFFICER OR DIRECTOR (5. BUSKER)

493-3075