

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704995

FILED
Feb 13, 2009
Secretary of State

Entity Name: CHURCH OF ST JOHN THE DIVINE INC

Current Principal Place of Business:

705 9TH ST. S.E.
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

705 9TH ST. S.E.
RUSKIN, FL 33570

New Mailing Address:

FEI Number: 59-0709153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILDER, TRACY H
705 9TH ST. S.E.
RUSKIN, FL 33570 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: PD () Delete
Name: WILDER, TRACY H
Address: 705 NINTH ST. S.E.
City-St-Zip: RUSKIN, FL 33570

Title: SD () Delete
Name: DEL CASTILLO, CAROLE
Address: 1224 HADDINGTON CIRCLE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: T () Delete
Name: WAGNER, HELEN
Address: 1510 ALLEGHENY DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: BARFIELD, CONNIE
Address: 12412 DAWN VISTA
City-St-Zip: RIVERVIEW, FL 33578

Title: D () Change (X) Addition
Name: CROLL, WALTER
Address: 1605 FLAMINGO DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D () Change (X) Addition
Name: EDISON, JACK
Address: 1606 VINCENNES DR.
City-St-Zip: SUN CITY CENTER, FL 33573

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: TRACY H. WILDER

P

02/13/2009

Electronic Signature of Signing Officer or Director

Date