2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705614

FILED Mar 26, 2009 Secretary of State

Entity Name: THE TANGERINE COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 7141 WRIGHT AVE TANGERINE, FL 32777 **Current Mailing Address: New Mailing Address:** P.O. BOX 281 TANGERINE, FL 32777 FEI Number: 59-2813841 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: SYMONDS, DIANA 4013 MYRTLE OAK CT ZELLWOOD, FL 32798 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete DYER, JAMES VANDENBERG, ANTHONY Name: Name: 5000 FRANKLIN ROAD Address: 7072 EARLWOOD AVE., P O BOX 314 Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: TANGERINE, FL 32777 Title: () Delete Title: (X) Change () Addition VANDENBERG, ANTHONY Name: COFFMAN, JAMES Name: Address: 7072 EARLWOOD AVE. POB 314 Address: WRIGHT AVENUE City-St-Zip: TANGERINE, FL 32777 City-St-Zip: TANGERINE, FL 32777 Title: () Delete Title: () Change () Addition NOSTRAND, VIVIAN Name: Name: 101 N GRANDVIEW # 110 Address: Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: KRAMER, BEVERLY Name: KRAMER, BEVERLY Address: 2116 WAX MYRTEL DR Address: 2116 WAX MYRTLE DR City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: ZELLWOOD, FL 32798 Title: () Delete Title: () Change () Addition CROWELL, DOROTHY Name: Name: 2667 LAKE GRASSMERE CIR Address: Address: City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: Title: () Delete Title: () Change () Addition SYMONDS, DIANA Name: Name: Address: 4013 MYRTLE OAK CT Address: ZELLWOOD, FL 32798 City-St-Zip: 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: DIANA SYMONDS TD 03/26/2009