2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705616

FILED Jan 14, 2009 Secretary of State

Entity Name: FIRST CHRISTIAN CHURCH OF WEST PALM BEACH, INCORPORATED

Current F	Principal Place of Business:	New Principal Place of Business:
	FH CONGRESS AVE LLM BEACH, FL 33409 US	
Current N	Nailing Address:	New Mailing Address:
	TH CONGRESS NLM BEACH, FL 33409 US	215 SOUTH CONGRESS AVE WEST PALM BEACH, FL 33409 US
FEI Numbei	r: 59-6187790 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
886 FORE	. KELLEY EST GLEN LANE ILM BEACH, FL 33414 US	
	e named entity submits this statement for the pee of Florida.	purpose of changing its registered office or registered agent, or both
	e of Florida. ** RE:	
n the Stat	e of Florida.	
in the Stat	e of Florida. ** RE:	
in the Stat	e of Florida. RE: Electronic Signature of Registered Ag	ent Date
in the Stat SIGNATU OFFICER Title: Name: Address:	e of Florida. RE: Electronic Signature of Registered Ago S AND DIRECTORS: T () Delete KELLEY, GLENN 886 FOREST GLEN LN	ent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name: Address:
on the State SIGNATU OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electronic Signature of Registered Agr S AND DIRECTORS: T () Delete KELLEY, GLENN 886 FOREST GLEN LN WEST PALM BEACH, FL 33414 T () Delete HAMBRIGHT, BILL 6312 SEVEN SPRINGS BLVD, APT B	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: CYNTHIA JAMES TR 01/14/2009