2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706993

FILED Jan 10, 2008 Secretary of State

Entity Name: THE CORAL ISLES CHURCH (UNITED CHURCH OF CHRIST, CONGREGATIONAL), INC.

Current Principal Place of Business: New Principal Place of Business: 90001 OVERSEAS HWY TAVERNIER, FL 33070 **Current Mailing Address: New Mailing Address:** 90001 OVERSEAS HWY TAVERNIER, FL 33070 FEI Number: 59-2344150 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: FROST, RICHARD W MR 633 NORTH JADE DRIVE KEY LARGO, FL 33037 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 KASPRISIN, JAY MR. KASPRISIN, JAY MR. Name: Name: 40 HIGH POINT ROAD #37 Address: 121 RIVIERA DRIVE Address: City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: TAVERNIER, FL 33070 () Delete Title: Title: () Change () Addition CONDE, VAL MS. Name: Name: Address: 105 GUMBO LIMBO RD Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: Title: () Delete Title: (X) Change () Addition HAUGEN, RANDAL MR. ASHMORE, SUSAN MS. Name: Name: Address: 87465 STATE RD 4A # 105 N Address: 174 PEARL STREET City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: TAVERNIER, FL 33070 Title: SD () Delete Title: () Change () Addition MORGAN, CHRIS MS. Name: Name: Address: PO BOX 2403 Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: Title: () Delete Title: () Change () Addition CONDE, PETER MR. Name: Name: 87465 OLD HIGHWAY # 232 Address: Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: Title: () Delete Title: () Change () Addition ZUBA, STAN MR Name: Name: Address: 125 RIVIERA DR Address: TAVERNIER, FL 33070 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: RICHARD W FROST RA 01/10/2008