

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707800

FILED
Apr 28, 2008
Secretary of State

Entity Name: CENTRAL CHURCH OF CHRIST, INCORPORATED, OF COCOA

Current Principal Place of Business:

2010 N. US 1
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 236065
COCOA, FL 329236065

New Mailing Address:

2010 N. US 1
COCOA, FL 32922

FEI Number: 59-2859810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTON, BRIAN R
3013 DUNHILL
COCOA, FL 32926 US

Name and Address of New Registered Agent:

TILLOTSON, TIM R
195 SONYA DR
COCOA, FL 32926 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: TIM TILLOTSON

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: DIAZ, JAVIER
Address: 93 DELANNOY AVE
City-St-Zip: COCOA, FL 32922 US

Title: PD () Delete
Name: WALKER, CECIL
Address: 4601 SOUTH FRIDAY CIRCLE
City-St-Zip: COCOA, FL 32926 US

Title: TD () Delete
Name: PETER, CURTIS
Address: 919 LEVITT PARKWAY
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: VD (X) Delete
Name: OLIVER, RAYMOND C
Address: 500 BELLA CAPRI DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952 US

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: () Change () Addition
Name:
Address:
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: TIM TILLOTSON

FD

04/28/2008

Electronic Signature of Signing Officer or Director

Date