2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707882

FILED Apr 07, 2009 Secretary of State

Entity Name: ARGYLE CHURCH OF CHRIST, INC.

Current Principal Place of Business: New Principal Place of Business:

7310 COLLINS ROAD JACKSONVILLE, FL 32244

Current Mailing Address: New Mailing Address:

7310 COLLINS ROAD JACKSONVILLE, FL 32244

FEI Number: 59-1069371 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:

GUTHRIE, DOUG 7168 HANSON DR. N. JACKSONVILLE, FL 32210 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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: PHILLIPE, EDDIE Name: MARKUM, OLEN

Address: 1017 BUCKBEAN BRANCH LANE W. Address: 2380 HAWKCREST DRIVE E. City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: ST. JOHN'S, FL 32259

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 MORRISON, DENNIS
 Name:
 GUTHRIE, DOUG

 Address:
 3033 MORNING SUN DRIVE
 Address:
 7168 HANSON DRIVE N.

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: DV () Delete Title: DV (X) Change () Addition

 Name:
 OLEN, MARKUM
 Name:
 MARK, STASCHKE

 Address:
 2380 HAWKCREST DR. E.
 Address:
 4975 ORTEGA FARMS BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32259
 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: DS () Delete Title: DS (X) Change () Addition

Name: STASCHKE, MARK Name: MORRISON, DENNIS
Address: 4975 ORTEGA FARMS BLVD. Address: 3033 MORNING SUN DRIVE
City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: MIDDLEBURG, FL 32068

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: EDDIE PHILLIPS C 04/07/2009