

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708741

FILED
Mar 20, 2007
Secretary of State

Entity Name: DAYTONA CHURCH OF THE UNITED BRETHREN IN CHRIST, INC.

Current Principal Place of Business:

560 FLOMICH AVENUE
HOLLY HILL, FL 32117

New Principal Place of Business:

Current Mailing Address:

560 FLOMICH AVENUE
HOLLY HILL, FL 32117

New Mailing Address:

FEI Number: 59-1429254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKEOWN, ROBERT (CHUCK) C
1650 CENTER STREET
HOLLY HILL, FL 32117 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: MCKEOWN, ROBERT C
Address: 1650 CENTER ST.
City-St-Zip: HOLLY HILL, FL 32117

Title: S () Delete
Name: MCKEOWN, VICKI L
Address: 1650 CENTER AVE.
City-St-Zip: HOLLY HILL, FL 32117

Title: T () Delete
Name: BUDZILEK, BRENDA
Address: 1654 CENTER AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: D () Delete
Name: EVANS, STEVE
Address: 1715 DERBYSHIRE ROAD
City-St-Zip: HOLLY HILL, FL 32117

Title: D () Delete
Name: HULL, DAVID
Address: 1608 RIVERSIDE DRIVE
City-St-Zip: HOLLY HILL, FL 32117

Title: D () Delete
Name: FOUNTAIN, SILAS
Address: 1053 SOUTH NOVA ROAD
City-St-Zip: ORMOND BEACH, FL 32174

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:

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 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: ROBERT C MCKEOWN

P

03/20/2007

Electronic Signature of Signing Officer or Director

Date