

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709821

FILED
Mar 21, 2009
Secretary of State

Entity Name: THE SPRING GARDEN AVENUE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

403 S SPRING GARDEN AVE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

403 S SPRING GARDEN AVE
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-1463878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, JAMES R
717 FOREST PARK DR
DELAND, FL 32720 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: PDT () Delete
Name: JOHNSON, JAMES,
Address: 717 FOREST PARK DR.
City-St-Zip: DELAND, FL 00000,

Title: D () Delete
Name: BLAIR, THOMAS W
Address: 1691 ROBERT BURNS RD.
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: WORLEY, EVERETT
Address: 700 E. WISCONSIN AVE.
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: FOWLER, FLOYD R
Address: 860 HANNAH RD.
City-St-Zip: PIERSON, FL 32180

Title: D () Delete
Name: FUGERER, WILLIAM H
Address: 104 SHER LANE
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: DELLAVECCHIA, LAWRENCE J
Address: 2891 STAGS LEAP DR
City-St-Zip: ORANGE CITY, FL 32763

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
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City-St-Zip:

Title: () Change () Addition
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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: JAMES JOHNSON

PDT

03/21/2009

Electronic Signature of Signing Officer or Director

Date