

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712222

FILED
Jan 21, 2009
Secretary of State

Entity Name: THE CHRISTIAN AND MISSIONARY ALLIANCE CHURCH, INCORPORATED, OF DELAND, FLORIDA

Current Principal Place of Business:

402 WEST NEW YORK AVENUE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

402 WEST NEW YORK AVENUE
DELAND, FL 32720

New Mailing Address:

FEI Number: 13-1623940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREER, DAVID L
734 LINDLEY BLVD
DELAND, FL 32724 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: TD () Delete
Name: HIGHTOWER, WILLIAM
Address: 697 VASSAR ROAD
City-St-Zip: DELAND, FL 32724 US

Title: CD () Delete
Name: GREER, DAVID L
Address: 734 LINDLEY BLVD
City-St-Zip: DELAND, FL 32724 US

Title: T () Delete
Name: NOHITSCH, MICHAEL A
Address: 2374 FITZPODRICK
City-St-Zip: DELTONA, FL 32725 US

Title: VC () Delete
Name: MERRILL, GLENN
Address: 704 S MONTGOMERY AVE
City-St-Zip: DELAND, FL 32720 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: ERIKSEN, DANIEL
Address: 206 SANDSPUR LN
City-St-Zip: DELAND, FL 32724 US

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: DAVID L GREER

CD

01/21/2009

Electronic Signature of Signing Officer or Director

Date