2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# 712542

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

Current Principal Place of Business:

218 SOUTH 14TH STREET
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

218 SOUTH 14TH STREET
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 59-2159208 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEISS, JAMES E
218 S 14TH ST
LEESBURG, FL 34748 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: C ( ) Delete
Name: WEISS, JAMES E
Address: 204 ROYAL DR
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete
Name: MUSSER, WALTER
Address: 122 HILL CIRCLE
City-St-Zip: LEESBURG, FL 34788

Title: D ( ) Delete
Name: DUDDLES, BRUCE
Address: 10645 CYPRESS RD.
City-St-Zip: LEESBURG, FL 34788

Title: T (X) Delete
Name: LAMA, DONALD C
Address: 708 4TH AVENUE
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: HARRIS, JOSEPH
Address: 34548 ESTES ROAD
City-St-Zip: EUSTIS, FL 32736

Title: T (X) Change ( ) Addition
Name: LAMA, DONALD C
Address: 708 4TH AVENUE
City-St-Zip: WILDWOOD, FL 34785

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: DONALD C LAMA T 02/12/2009

Electronic Signature of Signing Officer or Director — Date