2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#714264

FILED Mar 23, 2009 Secretary of State

Entity Name: THE FERNANDINA BEACH CHURCH OF CHRIST, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
1005 S 14 FERNANI	TH ST DINA BEACH, FL 32034	US				
Current Mailing Address:		New Maili	New Mailing Address:			
P.O. BOX FERNANI	543 DINA BEACH, FL 32035	US				
El Number	: 59-2724942 FEI Numl	per Applied For ()	FEI Number Not App	Dlicable () Certificate of Status Desired ()	
Name and	d Address of Current Re	gistered Agent:	Name and	d Address of New Registered Agent:		
1256 SUM FERNAND The above	D, CHARLES IMER TRACE DINA BEACH, FL 32034 E named entity submits this e of Florida.	US s statement for the p	ourpose of changing	its registered office or registered agent, or	both,	
SIGNATU	RE:					
SIGNATU		re of Registered Age	ent	Date		
		re of Registered Ago		Date NS/CHANGES TO OFFICERS AND DIRE	CTOR	
OFFICER Title: Jame: Address:	Electronic Signatu S AND DIRECTORS: P () Delete GOODE, BEAUFORD 497 LITTLE BERRY LN				CTOR	
DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Signatu S AND DIRECTORS: P () Delete GOODE, BEAUFORD 497 LITTLE BERRY LN	32034	ADDITION Title: Name: Address:	NS/CHANGES TO OFFICERS AND DIRE	CTOR	
	Electronic Signatu S AND DIRECTORS: P () Delete GOODE, BEAUFORD 497 LITTLE BERRY LN FERNANDINA BEACH, FL (V () Delete HOWARD, CHARLES 4256 SUMMER TRACE	32034 32034	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition () Change () Addition T (X) Change () Addition BECKHAM, WALTER M II 96046 HIGH POINTE DRIVE	CTOR	
DFFICER Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Name: Name: Name: Name: Name:	Electronic Signatures S AND DIRECTORS: P () Delete GOODE, BEAUFORD 497 LITTLE BERRY LN FERNANDINA BEACH, FL () V () Delete HOWARD, CHARLES 4256 SUMMER TRACE FERNANDINA BEACH, FL () ST () Delete BECKHAM, WALTER M II 96046 HIGH POINTE DRIVE	32034 32034 E 32034	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	() Change () Addition () Change () Addition () Change () Addition T (X) Change () Addition BECKHAM, WALTER M II 96046 HIGH POINTE DRIVE	CTOR	

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: WALTER M. BECKHAM II T 03/23/2009