

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714822

FILED
Jan 14, 2009
Secretary of State

Entity Name: PALM LAKE CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

5401 - 22ND AVENUE NORTH
ST PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

5401 - 22ND AVENUE NORTH
ST PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-0875703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, BILLY L
312 LAMARA WAY NE
ST PETERSBURG, FL 33704 US

Name and Address of New Registered Agent:

BARR, SYLVIA A
701 49TH STREET NORTH
ST PETERSBURG, FL 33710 US

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: SYLVIA A. BARR

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARR, SYLVIA
Address: 3301 62ND STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: SD () Delete
Name: SPARKS, MELISSA
Address: 1100 102ND AVENUE NORTH, 110
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: TD () Delete
Name: CHARLES, POPE
Address: 5001 21ST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: VD () Delete
Name: TEMME, REBECCA
Address: 2814 61ST LANE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARR, SYLVIA A
Address: 3301 62ND STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33710

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

Title: TD (X) Change () Addition
Name: POPE, CHARLES
Address: 5001 21ST AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: VD (X) Change () Addition
Name: ROUSH, EVERETT
Address: 5710 57TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33709

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: SYLVIA A. BARR

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date