

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715307

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** THE CHURCH OF GOD OF JENSEN, INC.

**Current Principal Place of Business:**

1050 NE COUNTY LINE RD  
JENSEN BEACH, FL 34958

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 647  
JENSEN BEACH, FL 34958

**New Mailing Address:**

**FEI Number:** 23-7045311

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAPOBIANCO, LINDA E  
219 EAST OCEAN BLVD.  
STUART, FL 34994 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: PD ( ) Delete  
Name: BENDER, LARRY G  
Address: 1050 NE COUNTY LINE RD  
City-St-Zip: JENSEN BEACH, FL 34958

Title: VD ( ) Delete  
Name: HARRIEL, OSCAR  
Address: 1050 NE COUNTY LINE RD  
City-St-Zip: JENSEN BEACH, FL 34958

Title: TD ( ) Delete  
Name: GEDDES, LEONARD  
Address: 1050 NE COUNTY LINE RD  
City-St-Zip: JENSEN BEACH, FL 34958

Title: SD ( ) Delete  
Name: WILLIAMS, DON  
Address: 1050 NE COUNTY LINE RD  
City-St-Zip: JENSEN BEACH, FL 34958

Title: D ( ) Delete  
Name: HODGE, THALIA M  
Address: 1050 NE COUNTY LINE RD  
City-St-Zip: JENSEN BEACH, FL 34958

Title: D (X) Delete  
Name: SILAS, MICHAEL  
Address: 1050 NE COUNTY LINE RD  
City-St-Zip: JENSEN BEACH, FL 34958

**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  
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: BISHOP LARRY G BENDER

PD

01/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date