2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 716041 Oct 15, 2008
Secretary of State

Entity Name: FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST, PALM CITY, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

560 SW 34TH STREET PALM CITY, FL 349903604

Current Mailing Address: New Mailing Address:

PO BOX 888 560 SW 34TH STREET PALM CITY, FL 34991 PALM CITY, FL 349903604

FEI Number: 59-1738185 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BELL, LISA A O'HEARN, DAWN
2511 SW MCDONALD ST 560 SW 34TH STREET
PORT ST LUCIE, FL 34953 US PALM CITY, FL 34990 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: DAWN M. O'HEARN 10/15/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: WITHAM, LOIS KLINKE Name: LONG, ISABEL

Address: 560 SW 34TH STREET Address: 560 SW 34TH STREET
City-St-Zip: PALM CITY, FL 349903604 City-St-Zip: PALM CITY, FL 349903604

Title: VP () Delete Title: VP (X) Change () Addition Name: MCMAHON, JOAN C Name: SEAGO, PAUL

 Address:
 560 SW 34TH STREET
 Address:
 560 SW 34TH STREET

 City-St-Zip:
 PALM CITY, FL 349903604
 City-St-Zip:
 PALM CITY, FL 349903604

Title: CS () Delete Title: CS (X) Change () Addition

 Name:
 MCMAHON, JOAN C
 Name:
 GRANT, DEBBIE

 Address:
 560 SW 34TH STREET
 Address:
 560 SW 34TH STREET

 City-St-Zip:
 PALM CITY, FL 349903604
 City-St-Zip:
 PALM CITY, FL 349903604

 Name:
 BELL, LISA A
 Name:
 O'HEARN, DÂWN M

 Address:
 560 SW 34TH STREET
 Address:
 560 SW 34TH STREET

 City-St-Zip:
 PALM CITY, FL 349903604
 City-St-Zip:
 PALM CITY, FL 349903604

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: ISABEL LONG P 10/15/2008