

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718943

FILED
Apr 16, 2009
Secretary of State

Entity Name: CHURCH OF THE RECONCILER, PRESBYTERIAN CHURCH (U.S.A.), OF CLEARWATER, FLORIDA, INC.

Current Principal Place of Business:

915 DREW ST.
CLEARWATER, FL 33755 US

New Principal Place of Business:

Current Mailing Address:

915 DREW ST.
CLEARWATER, FL 33755 US

New Mailing Address:

FEI Number: 59-1278458 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HARRISON, RAYMOND
4747 W. WATERS AVE
#1308
TAMPA, FL 33614 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: OD () Delete
Name: AMMONS, DIXIE
Address: 2052 LOS LAMAS DR
City-St-Zip: CLEARWATER, FL 33763

Title: OP () Delete
Name: RHODES, DEMORIS
Address: 2624 WINGING WAY DRIVE
City-St-Zip: TAMPA, FL 33615

Title: T () Delete
Name: HEAD, HARRIETT
Address: 1401 ROOSEVELT AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: FILER, ANGELA
Address: 13300 WALSINGHAM RD
City-St-Zip: LARGO, FL 33774

Title: T () Delete
Name: BELL, DELORIS
Address: 1356 TERR RD
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: BALLARD, LINA F
Address: 1503 DINNERBELL LANE E.
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: FILER, DEVEN L
Address: 13300 WALSINGHAM ROAD
City-St-Zip: LARGO, FL 33774

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

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

Title: () Change () Addition
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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: DELORIS F. BELL

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04/16/2009

Electronic Signature of Signing Officer or Director

Date