

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721050

FILED
Jan 08, 2008
Secretary of State

Entity Name: OZELLO COMMUNITY BAPTIST CHURCH, INC.

Current Principal Place of Business:

14131 OZELLO TRAIL
CRYSTAL RIVER, FL 34429 US

New Principal Place of Business:

Current Mailing Address:

14131 W OZELLO TRAIL
CRYSTAL RIVER, FL 34423

New Mailing Address:

FEI Number: 59-2387303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KONEY, JEAN M TREASUR
435 S HIBISCUS AVE
CRYSTAL RIVER, FL 34429 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: BATES, WILBER
Address: 2030 S HUNT POINT
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: VD () Delete
Name: MEADOWS, RONALD
Address: 511 SUNSET ROAD
City-St-Zip: INVERNESS, FL 34453

Title: S () Delete
Name: MYERS, ROBERT
Address: 20 S HIBISCUS AVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: T () Delete
Name: CLARK, BYRON
Address: 2120 S WATERMAN DRIVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D (X) Delete
Name: WATSON, EUGENE
Address: 2832 BRIARWOOD TERRACE
City-St-Zip: HOMOSASSA, FL 34428

Title: D (X) Delete
Name: CAVE, CHARLES
Address: 14450 W OZELLO TRAIL
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WATSON, EUGENE
Address: 2832 BRIARWOOD TERRACE
City-St-Zip: HOMOSASSA, FL 34448

Title: V (X) Change () Addition
Name: MYERS, ROBERT
Address: 20 S HIBISCUS AVE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D (X) Change () Addition
Name: JACKSON, TONY
Address: 14153 W OZELLO TRAIL
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: C (X) Change () Addition
Name: KONEY II, JOHN
Address: 435 S HIBISCUS AVE
City-St-Zip: CRYSTAL RIVER, FL 34429

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: JEAN MAE KONEY

TREA

01/08/2008

Electronic Signature of Signing Officer or Director

Date