2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731672

Apr 07, 2009 Secretary of State

Entity Name: CENTERPOINTE COMMUNITY CHURCH, INCORPORATED

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

8610 TEMPLE TERR. HWY 8610 TEMPLE TERR. HWY

P.O. BOX 16889 TEMPLE TERRACE, FL 33637 US TEMPLE TERRACE, FL 33687 US

Current Mailing Address: New Mailing Address:

8610 TEMPLE TERR. HWY PO BOX 16889

P.O. BOX 16889 TEMPLE TERRACE, FL 33687 US

TEMPLE TERRACE, FL 33637 US

FEI Number: 59-6159374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROOKS, KAYE BROOKS, STACEY S

8610 TEMPLE TERRACE HIGHWAY 8610 TEMPLE TERRACE HIGHWAY

TAMPA, FL 33637 TAMPA, FL 33637 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: STACEY BROOKS 04/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BROOKS, DALE A. BARTLETT, SCOTT PRES Name: Name:

12013 HAZEN AVE P.O. BOX 1106 Address: 12925 JESS WALDEN RD Address: City-St-Zip: THONOTOSASSA, FL 33592 City-St-Zip: **DOVER, FL 33527**

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

BROOKS, C.L., Name: BROOKS, CRAIG VPT Name: Address: 1102 WEST RIVER DRIVE Address: 9910 KINGSHYRE WAY City-St-Zip: TAMPA, FL 33617 City-St-Zip: TAMPA, FL 33647

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

BROOKS, KAYE, BROOKS, STACEY S Name: Name: Address: 12013 HAZEN AVE P.O. BOX 1106 9910 KINGSHYRE WAY Address: City-St-Zip: THONOTOSASSA, FL 33592 City-St-Zip: TAMPA, FL 33647

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

Name: MORRIS, WILLIAM F. Name: BONHAM, CHRIS D 1205 LAKECHARLES CIR 16706 VALLELY DRIVE Address: Address:

City-St-Zip: LUTZ, FL 33548 City-St-Zip: TAMPA, FL 33618

Title: () Delete (X) Change () Addition KNIGHT, PETER DOIDGE, DAN D Name: Name: 5401 S RUSSELL ST 29516 FOREST GLEN Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: WESLEY CHAPEL, FL 33543

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

PENVOSE, ERIC D Name: Name: Address: Address: 4814 SKY BLUE DR LUTZ, FL 33558 City-St-Zip: 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.

Title:

SIGNATURE: STACEY BROOKS S 04/07/2009