

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732885

FILED
Feb 06, 2009
Secretary of State

Entity Name: CHURCH OF DIVINITY, INC.

Current Principal Place of Business:

12011 N.W. 148TH PL.
P.O. BOX 1862
ALACHUA, FL 32615 US

New Principal Place of Business:

14523 NW 137TH TER
ALACHUA, FL 32615-628 US

Current Mailing Address:

12011 N.W. 148TH PL.
P.O. BOX 1862
ALACHUA, FL 32615 US

New Mailing Address:

14523 NW 137TH TER
ALACHUA, FL 32615-628 US

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

Name and Address of Current Registered Agent:

THOMAS, JEAN W.A.
12011 N.W. 148TH PL.
ALACHUA, FL 32615 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: THOMAS, JEAN W.
Address: 12011 N.W. 148TH PL
City-St-Zip: ALACHUA, FL 32615

Title: D () Delete
Name: MALANAPHY, MARCIA,
Address: 3916 NW 34TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: SD () Delete
Name: EISENBERG, MARILYN
Address: 8620-261 NW 13TH ST
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: LONG, SARAH L
Address: 12013 NW 147TH PL
City-St-Zip: ALACHUA, FL 32615

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:

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 W. THOMAS

PD

02/06/2009

Electronic Signature of Signing Officer or Director

Date