

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734462

FILED
Jan 13, 2008
Secretary of State

Entity Name: CHRISTIAN CHURCH OF MOORE HAVEN, INC.

Current Principal Place of Business:

AVENUE J
MOORE HAVEN, FL 33471

New Principal Place of Business:

Current Mailing Address:

AVENUE J
P.O. BOX 997
MOORE HAVEN, FL 33471

New Mailing Address:

FEI Number: 65-0199825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUGHES, NORMAN L.
370 E PARK AVE SE
MOORE HAVEN, FL 33471 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: DT () Delete
Name: HUGHES, NORMAN L.
Address: 370 E. PARK AVE SE
City-St-Zip: MOORE HAVEN, FL

Title: D () Delete
Name: GEROLD BARLOW,
Address: 616 YACHT CLUB WAY NW
City-St-Zip: MOORE HAVEN, FL 33471

Title: DS () Delete
Name: BOOHER, JOHN,
Address: 9 RIVER ROAD
City-St-Zip: MOORE HAVEN, FL 33471

Title: DV () Delete
Name: WILLIAMS, ROGER
Address: BRONSON ROAD
City-St-Zip: MOORE HAVEN, FL

Title: D () Delete
Name: CARL PERRY,
Address: 950 WESTERN DR.
City-St-Zip: MOORE HAVEN, FL

Title: D () Delete
Name: SACKS, EDWIN
Address: 310 YACHT CLUB WAY
City-St-Zip: MOORE HAVEN, FL 33471

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:

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: NORMAN L. HUGHES

DT

01/13/2008

Electronic Signature of Signing Officer or Director

Date