2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #741636

1. Entity Name FIRST CHRISTIAN CHURCH OF HOMOSASSA SPRINGS, FLORIDA, INC.



FILED Mar 07, 2008 8:00 am Secretary of State 03-07-2008 90033 029 ****70.00

						100 min								
Principal Place of Business 7030 W GROVER CLEVELAND BLVD HOMOSASSA SPRINGS, FL 34446 US				Mailing Address 7030 W GROVER CLEVELAND BLVD PO BOX 1806 HOMOSASSA SPRINGS, FL 34446 US				**************************************						
2. Principal Place of Business - No P.O. Box #				3. Mailing Address										
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				02272008	Chg-N	IP	CR2E	037 (12/06	5)	
City & State			City	City & State				4. FEI Number 59-188				—		ed For
Zip	Zip Country Zip			Country				5. Certificate of Status Desired \$8.75 Additional Fee Required						
6. Name and Address of Current Registe			ent Registere	d Agent			7. Name and	Address	of New R	legistere	l Agent			
						Name								-
SIVIA, GLEN 4116 W. OAKLAND STREET LECANTO, FL 34461						Street Address (P.O. Box Number is Not Acceptable)								
EECANIO	, FL 3440	,												
						City				FL Zip Code				
	named entity tions of regist	submits this statemer ered agent.	nt for the purpo	ose of changing its	registere	ed office or re	registere	ed agent, or bot	th, in the S	State of Fk	orida. I ar	n familiar wi	th, and	d accept
SIGNATURE .														
	Signature, typed	or printed name of registered a	gent and trie if appl	icable. (NOTE	: Registere	d Agent argnature	e required v	when reinstating)			DATE			
Filing Fee is \$61.25 Due by May 1, 2008			Election Campaign Financing Trust Fund Contribution.				f		M	leke eke	ck payable	a to		
	_							\$5.00 May B Added to Fees	le			artment of		•
10.	_	lay 1, 2008	DIRECTORS		ontributi		J ,	Added to Fees		Flor	ida Dep	artment of	State	
10.	Due by M		DIRECTORS	Trust Fund C	ontributi	ion. [J ,			Flor	ida Dep	artment of DIRECTORS	State)
TITLE	Due by M	OFFICERS AND	DIRECTORS		11.	ion.	J ,	Added to Fees		Flor	ida Dep	artment of	State	
TITLE NAME	Due by M D RIDDLE, L	OFFICERS AND	DIRECTORS	Trust Fund C	11.	ion.	J ,	Added to Fees		Flor	ida Dep	artment of DIRECTORS	State)
TITLE	Due by M D RIDDLE, L 2210 S W	OFFICERS AND INDELL GWAM POINT	DIRECTORS	Trust Fund C	11. TITLE NAME STREE	E EET ADDITESS	J ,	Added to Fees		Flor	ida Dep	artment of DIRECTORS	State)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by M D RIDDLE, L 2210 S WI HOMASAS	OFFICERS AND	DIRECTORS	Trust Fund C	11. TITLE NAM STRE	E EET ADDRESS -ST-ZIP	J ,	Added to Fees		Flor	ida Dep	DIRECTORS Chang	State	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by M D RIDDLE, L 2210 S W HOMASAS	OFFICERS AND OFFICERS AND INDELL IGWAM POINT SSA, FL 34448	DIRECTORS	Trust Fund C	11. TITLE NAM STRE CITY	E E E E ADDRESS -ST-ZP E	J ,	Added to Fees		Flor	ida Dep	artment of DIRECTORS	State)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DUE by MODULE, LOUIS NO HOMASAS DUSINA, GLI	OFFICERS AND OFFICERS AND INDELL IGWAM POINT SSA, FL 34448 EN .	DIRECTORS	Trust Fund C	11. TITLE NAME STREE CITY TITLE	E E E E T ADDRESS -ST-ZP E E	J ,	Added to Fees		Flor	ida Dep	DIRECTORS Chang	State	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DUE by MODE, L RIDDLE, L 2210 S WI HOMASAS D SIVIA, GLI 4116 W O	OFFICERS AND OFFICERS AND LINDELL IGWAM POINT SSA, FL 34448 EN . AKLAWN ST	DIRECTORS	Trust Fund C	11. TITLE NAM STRE CITY TITLE NAM STRE	E E E E ADDRESS -ST-ZP E	J ,	Added to Fees		Flor	ida Dep	DIRECTORS Chang	State	Addition
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR