

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741636

FILED
Mar 25, 2009
Secretary of State

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

Current Principal Place of Business:

7030 W GROVER CLEVELAND BLVD
HOMOSASSA SPRINGS, FL 34446 US

New Principal Place of Business:

Current Mailing Address:

7030 W GROVER CLEVELAND BLVD
PO BOX 1806
HOMOSASSA SPRINGS, FL 34446 US

New Mailing Address:

FEI Number: 59-1880617 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SIVIA, GLEN
4116 W. OAKLAND STREET
LECANTO, FL 34461 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: D () Delete
Name: RIDDLE, LINDELL
Address: 2210 S WIGWAM POINT
City-St-Zip: HOMASASSA, FL 34448

Title: D () Delete
Name: SIVIA, GLEN
Address: 4116 W OAKLAWN ST
City-St-Zip: LECANTO, FL 34461

Title: D () Delete
Name: ALDRET, RICHARD
Address: 8418 W. ELOSSA CT.
City-St-Zip: HOMOSASSA, FL 34448

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: RIGNEY, LEVI
Address: 168 CYPRESS BLVD E
City-St-Zip: HOMOSASSA, FL 34446

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: LINDELL RIDDLE

D

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date