

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742571

FILED
Jul 31, 2008
Secretary of State

Entity Name: BUSHNELL CHURCH OF CHRIST, INC.

Current Principal Place of Business:

310 DADE AVE.
PO BOX 310
BUSHNELL, FL 33513

New Principal Place of Business:

310 DADE AVE.
BUSHNELL, FL 33513

Current Mailing Address:

310 DADE AVE.
PO BOX 310
BUSHNELL, FL 33513

New Mailing Address:

310 DADE AVE.
P.O. BOX 310
BUSHNELL, FL 33513

FEI Number: 59-1886519 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRAZIER, GLENN
11854 SW 29TH DR
WEBSTER, FL 33597 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: VP () Delete
Name: CRESS, HOLLIS
Address: 2156 CR 437A
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: PD () Delete
Name: MCKANDREE, ROBERT C
Address: 693 CR 463 -A
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: STD () Delete
Name: FRAZIER, GLENN
Address: 11854 SW 29TH DR
City-St-Zip: WEBSTER, FL 33597

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:

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: GLENN FRAZIER

STD

07/31/2008

Electronic Signature of Signing Officer or Director

Date