

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750993

FILED
Apr 12, 2007
Secretary of State

Entity Name: CORNERSTONE CHURCH OF DE FUNIAK SPRINGS, INC.

Current Principal Place of Business:

2044 STATE HWY 83 NORTH
DEFUNIAK SPRINGS, FL 32433 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1329
DEFUNIAK SPRINGS, FL 32435 US

New Mailing Address:

FEI Number: 59-2243946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDWINE, DOYLE G
1428 CO HWY 280 EAST
DEFUNIAK SPRINGS, FL 32435 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: DP () Delete
Name: REDWINE, DOYLE G
Address: 1428 CO. HWY 280 EAST
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: SDT () Delete
Name: REDWINE, JANIS W
Address: 1428 CO. HWY 280 EAST
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: DVP () Delete
Name: HAMON, WILLIAM S DVP
Address: 143 PROPHETS PKWY
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D () Delete
Name: SCHELL, JOHN D
Address: 13951 SCHELL LANE
City-St-Zip: SUMMERDALE, AL 36580

Title: D () Delete
Name: HAMON, TIMOTHY D
Address: 326 HAMON AVE.
City-St-Zip: SANTA ROSA BEACH, FL 32459

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DOYLE G REDWINE

DP

04/12/2007

Electronic Signature of Signing Officer or Director

Date