2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N00000003018

Entity Name: THE GOLF VILLAGE CHURCH, INC.

Current Principal Place of Business:

4225 PACETTI RD
ST. AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

4225 PACETTI RD
ST. AUGUSTINE, FL 32092 US

New Mailing Address:

4225 PACETTI RD
ST. AUGUSTINE, FL 32092 US

FEI Number: 01-0614579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAY, ROBERT E
613 COPPER HEAD CIRCLE
ST AUGUSTINE, FL 32092 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:	PD	( ) Delete
Name:	MAY, ROBERT E	
Address:	613 COPPER HEAD CIRCLE	
City-St-Zip:	ST AUGUSTINE, FL 32092 US	
Title:	TD	( ) Delete
Name:	WITHERS, DONALD F	
Address:	145 N CHAMPIONS WAY, UNIT 123	
City-St-Zip:	SAINT AUGUSTINE, FL 32092 US	
Title:	D	( ) Delete
Name:	FATTIZZI, VINCENT	
Address:	1862 W COBBLESTONE LANE	
City-St-Zip:	ST. AUGUSTINE, FL 32092 US	
Title:	D	(X) Delete
Name:	FLAHARDY, LARRY	
Address:	3412 W. HERITAGE COVE	
City-St-Zip:	ST. AUGUSTINE, FL 32092 US	
Title:	D	( ) Delete
Name:	FARLEY, DOUGLAS	
Address:	1177 SANDLAKE RD	
City-St-Zip:	ST. AUGUSTINE, FL 32092 US	
Title:	D	( ) Delete
Name:	SULLIVAN, JUANITA R	
Address:	154 S END ST	
City-St-Zip:	SAINT AUGUSTINE, FL 32095 US	

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: DONALD F WITHERS TD 04/14/2009

Electronic Signature of Signing Officer or Director — Date