

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006101

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: CPM CHURCH, INC.

**Current Principal Place of Business:**

5207 MASON DIXON AVE  
BOWLING GREEN, FL 33834

**New Principal Place of Business:**

**Current Mailing Address:**

5207 MASON DIXON AVE  
BOWLING GREEN, FL 33834

**New Mailing Address:**

FEI Number: 04-3672825

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PARKER, MARK  
5207 MASON DIXON AVE  
BOWLING GREEN, FL 33834 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: HERRON, DOUG  
Address: 516 S 11TH AVE  
City-St-Zip: WAUCHULA, FL 33873

Title: D ( ) Delete  
Name: PARKER, JOHNNY  
Address: 3824 PARKER RD  
City-St-Zip: BOWLING GREEN, FL 33834

Title: D ( ) Delete  
Name: TAYLOR, BARRY  
Address: 2545 MATTE RD  
City-St-Zip: AVON PARK, FL 33825

Title: D ( ) Delete  
Name: PALMER, EARNEST  
Address: 214 W PALMETTO AVE  
City-St-Zip: WAUCHULA, FL 33873

Title: D ( ) Delete  
Name: PARKER, MARK  
Address: 5207 MASON DIXON AVE  
City-St-Zip: BOWLING GREEN, FL 33834

**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 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: STEPHANIE PARKER

SEC

01/22/2009

Electronic Signature of Signing Officer or Director

Date