

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001090

FILED
Feb 17, 2008
Secretary of State

Entity Name: NORTH RIVER CHURCH OF CHRIST, INC.

Current Principal Place of Business:

13885 US HWY 301 N
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

P.O BOX 527
PARRISH, FL 34219

New Mailing Address:

FEI Number: 74-2984442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYERS, MARK
5860 FT HAMER ROAD
PARRISH, FL 34219 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: DALEY, JAMES
Address: 306 SEDGEWICK CT.
City-St-Zip: SUN CITY CENTER, FL 33573 US

Title: VD () Delete
Name: ROBERT, OLER C
Address: 304 STROLL LANE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: STD () Delete
Name: BYERS, MARK L
Address: 5860 FT. HAMER RD.
City-St-Zip: PARRISH, FL 34219 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:

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: MARK L. BYERS

STD

02/17/2008

Electronic Signature of Signing Officer or Director

Date