

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001251

FILED  
Apr 01, 2009  
Secretary of State

**Entity Name:** CHURCH OF SPIRITUAL AWAKENING AFSC, INC.

**Current Principal Place of Business:**

8 BROADWAY  
SUITE 226  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

1045 N. JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741

**Current Mailing Address:**

P. O. BOX 421105  
KISSIMMEE, FL 34742

**New Mailing Address:**

1045 N. JOHN YOUNG PARKWAY  
KISSIMMEE, FL 34741

**FEI Number:** 59-3699463

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KINGSLIEN, MARY K  
338 KASSIK CIRCLE  
ORLANDO, FL 32824 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: P ( ) Delete  
Name: KINGSLEIN, REV MARY  
Address: 338 KASSIK CIR  
City-St-Zip: ORLANDO, FL 32824

Title: VP ( ) Delete  
Name: SHERWOOD, HELEN  
Address: 11035 COUNTRY HILL RD  
City-St-Zip: CLERMONT, FL 34711

Title: S ( ) Delete  
Name: DAVIES, MICHAEL  
Address: 3227 ST.AUGUSTINE CT  
City-St-Zip: KISSIMMEE, FL 34746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: JORDAN, AIDA  
Address: 7415 RIPLEY COURT  
City-St-Zip: ORLANDO, FL 32836

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: MARY KINGSLIEN

P

04/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date