

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003207

FILED
May 02, 2010
Secretary of State

Entity Name: IN THE IMAGE OF CHRIST, INC.

Current Principal Place of Business:

1203 ORANGE AVENUE
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

PO BOX 12397
FORT PIERCE, FL 34979

New Mailing Address:

FEI Number: 65-1104332 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOYLMAN, KEITH R
1713 ANECI STREET
PORT ST. LUCIE, FL 34983 US

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,D
Name: HOYLMAN, HAZEL
Address: 1713 ANECI ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP,D
Name: LUTHER, SHEILA
Address: 1381 SE ELYTON CT
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: ST,D
Name: SCOTT, CARRIE M
Address: 3306 AVE K
City-St-Zip: FT PIERCE, FL 34947

Title: D
Name: HOWARD, JOHN
Address: 601 AVE B APT 712
City-St-Zip: FORT PIERCE, FL 34950

Title: D
Name: CAMPBELL, CLAUDETTE
Address: 752 KILGORE ST
City-St-Zip: WILDWOOD, FL 34785

I hereby 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 all other like empowered.

SIGNATURE: HAZEL HOYLMAN

P,D

05/02/2010

Electronic Signature of Signing Officer or Director

Date