2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005194

FILED May 04, 2008 Secretary of State

Entity Name: SOUTH COUNTY CHRISTIAN FELLOWSHIP, INC. **Current Principal Place of Business: New Principal Place of Business:** 10632 NAVIGATION DR. 7230 U.S. HWY 301 S., SUITE 3 RIVERVIEW, FL 33569 RIVERVIEW, FL 33578 **Current Mailing Address: New Mailing Address:** 7230 U.S. HWY 301 S., SUITE 3 7230 U.S. HWY 301 S., SUITE 3 RIVERVIEW, FL 33569 RIVERVIEW, FL 33578 FEI Number: 59-3752752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: HOLMES, BYRON B HOLMES, BYRON B 7230 U.S. HWY 301 S., SUITE 3 7230 U.S. HWY 301 S., SUITE 3 RIVERVIEW, FL 33569 RIVERVIEW, FL 33578 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: BYRON B. HOLMES 05/04/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Change () Addition () Delete HOLMES, BYRON B Name: Name: Address: 10632 NAVIGATION DRIVE Address: City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: KLEIN, PETER Name: Address: 2424 W. TAMPA BAY BLVD. #202 Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: Title: () Delete Title: () Change () Addition DROULLARD, JOSHUA Name: Name: 12751 LAKE VISTA DRIVE Address: Address: City-St-Zip: GIBSONTON, FL 33534 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: BYRON B. HOLMES DP 05/04/2008