

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005194

FILED
Apr 20, 2009
Secretary of State

Entity Name: SOUTH COUNTY CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

7230 U.S. HWY 301 S., SUITE 3
RIVERVIEW, FL 33578

New Principal Place of Business:

10520 SOUTHERN POINTE BLVD
RIVERVIEW, FL 33579

Current Mailing Address:

7230 U.S. HWY 301 S., SUITE 3
RIVERVIEW, FL 33578

New Mailing Address:

10632 NAVIGATION DRIVE
RIVERVIEW, FL 33579

FEI Number: 59-3752752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMES, BYRON B
7230 U.S. HWY 301 S., SUITE 3
RIVERVIEW, FL 33578 US

Name and Address of New Registered Agent:

HOLMES, BYRON B
10632 NAVIGATION DRIVE
RIVERVIEW, FL 33579 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: BYRON B. HOLMES

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HOLMES, BYRON B
Address: 10632 NAVIGATION DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: VD () Delete
Name: DROULLARD, JOSHUA
Address: 12751 LAKE VISTA DRIVE
City-St-Zip: GIBSONTON, FL 33534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HOLMES, BYRON B
Address: 10632 NAVIGATION DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: VD (X) Change () Addition
Name: DROULLARD, JOSHUA
Address: 2411 HIGHGATE STREET, #4
City-St-Zip: MEDFORD, OR 97501

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

04/20/2009

Electronic Signature of Signing Officer or Director

Date