2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2009
Secretary of State

DOCUMENT# N01000007154

Entity Name: CHRIST COMMUNITY CHURCH OF WINTER HAVEN, INC.

Current Principal Place of Business:

1895 OVERLOOK DR SE
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

1895 OVERLOOK DR SE
WINTER HAVEN, FL 33884 US

New Mailing Address:

1895 OVERLOOK DR SE
WINTER HAVEN, FL 33884

FEI Number: 59-3748046 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOCKWOOD, DOUGLAS A
141 FIFTH STREET N.W.
WINTER HAVEN, FL 33881 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: D ( ) Delete
Name: JAMES, S. MARK
Address: 564 ST. ANDREWS ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: CB ( ) Delete
Name: REYNOLDS, WILLIAM C
Address: 50 SKIDMORE DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete
Name: PAYNE, III, NORMAN C
Address: 2980 PLANTATION ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete
Name: PAYNE, CYNTHIA C
Address: 2980 PLANTATION ROAD S.
City-St-Zip: WINTER HAVEN, FL 33884

Title: D ( ) Delete
Name: LOCKWOOD, DOUGLAS A
Address: 141 FIFTH STREET N.W.
City-St-Zip: WINTER HAVEN, FL 33881

Title: T ( ) Delete
Name: SCHAAL, MARY
Address: 235 6TH STREET NW UNIT 604
City-St-Zip: WINTER HAVEN, FL 33881

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:

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: CYNTHIA C. PAYNE S 01/11/2009
Electronic Signature of Signing Officer or Director — Date