2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003593

Entity Name: ELHOIM CHRISTIAN CHURCH, INC.

FILED Apr 14, 2008 Secretary of State

Current Pr	incipal Place	e of Business:	New Princ	New Principal Place of Business:		
1665 MALABAR RD MALABAR, FL 32950 US		2154 ADAN PALM BAY	MS ST ′, FL 32905	US		
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 10 PALM BAY	00385 , FL 32910	US				
FEI Number: 30-0226519		FEI Number Applied For()	FEI Number Applied For () FEI Number Not Applicable (Certificate of Status De	sired (X)
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
4706 GAIL	ELISEO PAS BLVD. _BOURNE, FI					
The above in the State		submits this statement for the pu	rpose of changing i	ts registered o	office or registered age	nt, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent			nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ROSARIO, ELI 4706 GAIL BLV		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (ROSARIO, SAM 1241 GOODE I PALM BAY, FL	DR NE	Title: Name: Address: City-St-Zip:	SEC (X ROSARIO, SAI 1241 GOODE PALM BAY, FL	DR NE	
Title: Name: Address: City-St-Zip:	T (BURGOS, JOS 1529 WIGMOR PALM BAY, FL	RE ST SE	Title: Name: Address: City-St-Zip:	TRES (X BURGOS, JOS 1529 WIGMOF PALM BAY, FL	RE ST SE	
Title: Name: Address: City-St-Zip:	D (NIEVES, MARIA 1335 WAYSIDI PALM BAY, FL	E CT NE	Title: Name: Address: City-St-Zip:	O (X NIEVES, MARI 1335 WAYSID PALM BAY, FL	E CT NE	
Title: Name: Address: City-St-Zip:	VARGAS, CARI 4406 GAIL BLV		Title: Name: Address: City-St-Zip:	VARGAS, CAR 4406 GAIL BLY		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	O (ROSARIO, ELI 301 RILEY ST PALM BAY, FL	NE	

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: JOSE A BURGOS TRES 04/14/2008