

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008015

FILED
Apr 18, 2011
Secretary of State

Entity Name: CREEKSIDE ALLIANCE CHURCH INC. OF THE CHRISTIAN AND MISSIONARY ALLIANCE, PORT ORANGE, FLORIDA

Current Principal Place of Business:

139 S STATE RD 415
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

6539 SHAHAB LANE
PORT ORANGE, FL 32128

Current Mailing Address:

139 S STATE RD 415
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

PO BOX 290624
PORT ORANGE, FL 32129

FEI Number: 59-3751180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLNEY, THOMAS R REV
139 S STATE RD 415
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

OLNEY, THOMAS R REV
6539 SHAHAB LANE
PORT ORANGE, FL 32128 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:

04/18/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: OLNEY, THOMAS R
Address: 6539 SHAHAB LANE
City-St-Zip: PORT ORANGE, FL 32128

Title: SD
Name: PARKER, LAWRENCE
Address: 3608 SOCHA WAY
City-St-Zip: PORT ORANGE, FL 32129

Title: TD
Name: FAIDLEY, KEVIN
Address: 3602 MARIBELLA DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: FORD, NORMAN
Address: 108 CYPRESS POND ROAD
City-St-Zip: PORT ORANGE, FL 32128

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: THOMAS R. OLNEY

PD

04/18/2011

Electronic Signature of Signing Officer or Director

Date