

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 29, 2009
Secretary of State

DOCUMENT# N03000001602

Entity Name: PALM CITY CHRISTIAN CHURCH, INC.**Current Principal Place of Business:**6450 SW MARTIN HWY.
PALM CITY, FL 34990**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 187
PALM CITY, FL 34991**New Mailing Address:**6450 SW MARTIN HWY
PALM CITY, FL 34990**FEI Number:** 32-0066642**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAUDIEN, EDWARD
4992 SE MARINER VILLAGE LANE
STUART, FL 34997 US**Name and Address of New Registered Agent:**GALBICKA, TONY
1935 SW SILVER PINE WAY
117E-1
PALM CITY, FL 34990 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: TONY GALBICKA

05/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAUDIEN, EDWARD
Address: 4992 SE MARINER VILLAGE WAY
City-St-Zip: STUART, FL 34994

Title: VD () Delete
Name: WEIMER, CLARK
Address: 3504 SW ASPEN PLACE
City-St-Zip: PALM CITY, FL 34990

Title: TR (X) Delete
Name: GRAFFLEY-PERRY, JOYCE
Address: 3486 SW PINDO PALM LANE
City-St-Zip: PALM CITY, FL 34990

Title: S (X) Delete
Name: EMMETT, ROY
Address: 1939 WINNERS DRIVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GALBICKA, TONY
Address: 1935 SW SILVER PINE WAY
City-St-Zip: PALM CITY, FL 34990

Title: SD (X) Change () Addition
Name: MANKIN, BETH
Address: 2740 SLADE PLACE
City-St-Zip: PORT ST. LUCIE, FL 34953

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: TONY GALBICKA

PD

05/29/2009

Electronic Signature of Signing Officer or Director

Date