2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004168

FILED Mar 23, 2009 Secretary of State

Entity Name: CHRISTIAN CHURCH REMNANT OF GOD, INC.

Current Principal Place of Business: New Principal Place of Business: 6408 N. ARMENIA AVENUE SUITE 1 TAMPA, FL 33604 **New Mailing Address: Current Mailing Address:** 6408 N. ARMENIA AVENUE SUITE 1 TAMPA, FL 33604 FEI Number: 41-2097433 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: LOTHROP, MONICA V MEDINA, DANIEL 101 E. KENNEDY BLVD. 902 SOUTH FLORIDA AVE. **SUITE 2800** SUITE 101 LAKELAND, FL 33803 US TAMPA, FL 33602 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: DANIEL MEDINA 03/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete CORDERO, YAMILETH CORDERO, YAMILETH Name: Name: 4426 LETO LAKES BLVD APT 203 Address: 8810 BAYAUD DR. Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33626 Title: SD () Delete Title: () Change () Addition VILLANUEVA, SILVIA Name: Name: Address: 2911 W. WILDER AVE. Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: () Delete Title: (X) Change () Addition CHACON, LUIS CHACON, LUIS Name: Name: 5102 BELMERE PKWY APT 1401 13614 PARK LAKE DR. APT. 102 Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33618 (X) Change () Addition Title: VD Title: VD () Delete VAZQUEZ, FRANCISCO Name: Name: VAZQUEZ, FRANCISCO 5807 LADYBUG CT. Address: Address: 15613 BEAR CREEK DR. City-St-Zip: TAMPA, FL 33625 City-St-Zip: TAMPA, FL 33624 Title: () Delete Title: () Change () Addition ARGUETA, MOISES Name: Name: 1200 E. BOUGANVILLEA AVE. APT. A Address: Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip: Title: () Delete Title: () Change () Addition CELIS, GLORIA Name: Name: Address: 8709 NORTH 29TH ST. Address: TAMPA, FL 33604 City-St-Zip: 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: LUIS CHACON TD 03/23/2009