2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004750

Entity Name: TRUE WORSHIP CHRISTIAN CENTER INC.

Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

9340 N. 56TH STREET 3416 N. 15 TH ST

US TAMPA, FL 33605 TEMPLE TERRACE, FL 33617 US

New Mailing Address: Current Mailing Address:

P.O. BOX 292122 TAMPA, FL 33687 US

FEI Number: 14-1886237 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOTT, DONALD R JR 8005 TIERRA VERDE DR. TAMPA, FL 33617

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

LOTT, DONALD R JR. LOTT, DONALD R JR. Name: Name: 8005 TIERRA VERDE DR. Address: 8005 TIERRA VERDE DR. Address: City-St-Zip: TAMPA, FL 33617 US City-St-Zip: TAMPA, FL 33617 US

Title: Title: (X) Change () Addition () Delete LOTT, TIFFANY C Name: LOTT, TIFFANY C Name: Address: 8005 TIERRA VERDE DR. Address: 8005 TIERRA VERDE DR.

City-St-Zip: TAMPA, FL 33617 US City-St-Zip: TAMPA, FL 33617 US

Title: () Delete Title: (X) Change () Addition WILSON, VERONICA L GANT, KENNETH D Name: Name:

13101 WHITESTONE DR. APT. A 8409 RIO BRAVO CT UNIT 4 Address: Address: City-St-Zip: TAMPA, FL 33617 US City-St-Zip: TAMPA, FL 33617 US

() Delete Title: Title: (X) Change () Addition

RODRIGUEZ, IVORY M Name: Name: TIM, REGINALD 2006 E. JEAN ST. Address: Address: 1711 W. ST. LOUIS City-St-Zip: TAMPA, FL 33610 US City-St-Zip: TAMPA, FL 33607 US

Title: () Delete Title: (X) Change () Addition

WILLIAMS, STEVE HENRY, JOAN Name: Name: 18112 PALM BEACH DR 4435 W. PINTON PL Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33619

Title: (X) Delete Title: () Change () Addition

WILLIAMS, SONJI Name: Name: Address: 18112 PALM BEACH DR. Address: TAMPA, FL 33647 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: DONALD R. LOTT Ρ 04/29/2009