

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004900

FILED
Jan 17, 2009
Secretary of State

Entity Name: NON DENOMINATIONAL WORSHIP, ISLAND IN THE SUN INC.

Current Principal Place of Business:

1001 STARKEY RD., #166
LARGO, FL 33771

New Principal Place of Business:

1001 STARKEY RD., #58A
LARGO, FL 33771

Current Mailing Address:

1001 STARKEY RD., #166
LARGO, FL 33771

New Mailing Address:

FEI Number: 11-3687326 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AUSTIN, ROSEANNA
1001 STARKEY RD., #166
LARGO, FL 33771 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GREEN, NORMAN
Address: 1001 STARKEY RD, # 251
City-St-Zip: LARGO, FL 33771

Title: VP () Delete
Name: JOHNSON, SERENA
Address: 1001 STARKEY RD LOT 257
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: NOODWANG, FRED
Address: 1001 STARKEY RD, # 323
City-St-Zip: LARGO, FL 33771

Title: S () Delete
Name: AUSTIN, ROSEANNA
Address: 1001 STARKEY RD, #166
City-St-Zip: LARGO, FL 33771

Title: T () Delete
Name: BALL, TARA
Address: 1001 STARKEY RD 155
City-St-Zip: LARGO, FL 33771

Title: VPD () Delete
Name: BEDGOOD, DOUGLAS
Address: 1001 STARKEY RD 415
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MCNALLY, BILL
Address: 1001 STARKEY RD #295
City-St-Zip: LARGO, FL 33771

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: ROSEANNA M AUSTIN

S

01/17/2009

Electronic Signature of Signing Officer or Director

Date