2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011017

Apr 30, 2009 Secretary of State

Entity Name: OSCEOLA CHRISTIAN CHURCH INC. **Current Principal Place of Business: New Principal Place of Business:** 1122 PENNSYLVANIA AVE ST CLOUD, FL 34769 **Current Mailing Address: New Mailing Address:** P.O.BOX 701539 ST CLOUD, FL 34770 FEI Number: 59-1794135 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: SMITH, MIKE 4159 LASALLE AVENUE ST CLOUD, FL 34772 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SMITH, MIKE Name: Name: Address: 4159 LA SALLE AVEUE Address: City-St-Zip: ST CLOUD, FL 34772 City-St-Zip: Title: () Delete Title: () Change () Addition Name: COUCH, TIMOTHY Name: Address: 3940 ROGERS STREET Address: City-St-Zip: FT. MYERS, FL 33901 City-St-Zip: Title: () Delete Title: () Change () Addition JENKINS, DENNIS Name: Name: 4848 SPARROW DRIVE Address: Address: City-St-Zip: ST CLOUD, FL 34772 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: MIKE R. SMITH D 04/30/2009