

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03021

FILED
Jun 22, 2009
Secretary of State

Entity Name: SWISS COVE CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

1965 STATE ROAD 13
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

1965 STATE ROAD 13
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 59-2403764 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BURNAM, R. LAVON
1235 LEMONWOOD ROAD
JACKSONVILLE, FL 32259 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: WIGGINS, BURKE
Address: 1191 EAGLE BLUFF LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: SMITH, PAUL
Address: 11587 GWYNFORD LINE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: BURESS, HOMER
Address: 11577 WEST RIDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: BURNAM, LAVON
Address: 1235 LEMONWOOD ROAD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: GALBEAITH, JON
Address: 500 N BRIDGESTONE AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WIGGINS, BURLE
Address: 1191 EAGLE BLUFF LANE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D (X) Change () Addition
Name: CASH, JAMES
Address: 12769 EDENBRIDGE COURT
City-St-Zip: JACKSONVILLE, FL 32223

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

Title: C (X) Change () Addition
Name: BURNAM, LAVON
Address: 1235 LEMONWOOD ROAD
City-St-Zip: JACKSONVILLE, FL

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

Title: D () Change (X) Addition
Name: KELLY, STEVE
Address: 4901 BLACKHAWK DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

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: LAVON BURNAM

C

06/22/2009

Electronic Signature of Signing Officer or Director

Date