

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N04000004362

Entity Name: THE CHURCH HOUSE, INC

Current Principal Place of Business:

2820 WEST AMELIA STREET
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

2820 WEST AMELIA STREET
CASSELBERRY, FL 32805

New Mailing Address:

FEI Number: 32-0119647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZANDERS, BETTY
2820 WEST AMELIA STREET
ORLANDO, FL 32805 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: ZANDERS, B J
Address: 2820 WEST AMELIA STREET
City-St-Zip: ORLANDO, FL 32805

Title: VP () Delete
Name: MOORE, BYRON
Address: 2820 WEST AMELIA STREET
City-St-Zip: ORLANDO, FL 32805

Title: ADV () Delete
Name: DONNA, FORREST
Address: P O BOX 455
City-St-Zip: GROVELAND, FL 34736

Title: SEC () Delete
Name: MITCHELL, LAVERNE
Address: 2820 WEST AMELIA STREET
City-St-Zip: ORLANDO, FL 32805

Title: ADV () Delete
Name: THOMAS, TORRY
Address: 1907 IVEY LANE
City-St-Zip: ORLANDO, FL 32707

Title: ADV () Delete
Name: ROBBINS, SYLVESTER
Address: 3956 SILVER STAR ROAD
City-St-Zip: ORAND, FL 32805

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: () Change () Addition
Name:
Address:
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: BETTY ZANDERS

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date