2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008722

FILED Feb 24, 2009 Secretary of State

Entity Name: GREATER DIMENSIONS CHRISTIAN ASSEMBLY DUNNELLON, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	PENNSYLVANI	A AVE		
SUITE B DUNNELL	ON, FL 34432			
Current M	ailing Addres	s:	New Mailing Addre	ess:
19120 E. P	PENNSYLVANI	A AVE		
SUITE B	ON, FL 34432			
	: 20-1488149	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
				.,
Name and	Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:
	SON, ALEC D 135TH ST RD L 34473 US	3		
		1 2 0 1 1 1 1 1 1 1 1 1		red office or registered agent, or both,
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registe	red office of registered agent, or both,
n the State	e of Florida.	submits this statement for the p	ourpose of changing its registe	red office of registered agent, or both,
n the State	e of Florida. É	submits this statement for the parties in the parties of Registered Age		Date
in the State	e of Florida. É	ic Signature of Registered Age	ent	
in the State	e of Florida. RE: Electron S AND DIREC	ic Signature of Registered Age TORS: Delete ALEC D H ST RD	ent	Date
in the State SIGNATUF OFFICERS Title: Name: Address:	e of Florida. RE: Electron S AND DIREC P () RICHARDSON, 8266 SW 135TI OCALA, FL 344	ic Signature of Registered Age TORS: Delete ALEC D H ST RD 473 Delete DWARD ADOR LN	ent ADDITIONS/CHAN Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR
in the State SIGNATUF OFFICERS Title: Name: Address: City-St-Zip: Vame: Name: Address:	e of Florida. RE: Electron S AND DIREC P () RICHARDSON, 8266 SW 135TI OCALA, FL 344 TREA () CHESTNUT, ED 190 E AMBASS OCALA, FL 344	ic Signature of Registered Age TORS: Delete ALEC D H ST RD 473 Delete WARD ADOR LN 434 Delete ARD ST. RD	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR () Change () Addition

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: ALEC RICHARDSON P 02/24/2009