2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010197

FILED Apr 15, 2010 Secretary of State

Entity Name: SUNRISE WORSHIP CENTER OF MARIANNA, INC.

Current Principal Place of Business: New Principal Place of Business:

2965 SUNRISE DRIVE MARIANNA, FL 32448

Current Mailing Address: New Mailing Address:

2965 SUNRISE DRIVE 2965 SUNRISE DRIVE MARIANNA, FL 32448 US

FEI Number: 68-0578094 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:

EVERETT, SAMUEL SR. 2965 SUNRISE DRIVE MARIANNA, FL 32448 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: [

Name: EVERETT, SAMUEL SR.
Address: POST OFFICE BOX 6342
City-St-Zip: MARIANNA, FL 324476342 US

Title: D

 Name:
 GOINES, MARY

 Address:
 POST OFFICE BOX 6342

 City-St-Zip:
 MARIANNA, FL 324476342 US

Title:

 Name:
 GROOMES, JACKIE

 Address:
 POST OFFICE BOX 6342

 City-St-Zip:
 MARIANNA, FL 324476342 US

Title:

 Name:
 DAWSEY, TAKSHIRA

 Address:
 POST OFFICE BOX 6342

 City-St-Zip:
 MARIANNA, FL 324476342 US

Title:

 Name:
 CALDWELL, WALTER

 Address:
 POST OFFICE BOX 6342

 City-St-Zip:
 MARIANNA, FL 324476342 US

Title: [

 Name:
 WARREN, REMONICA

 Address:
 POST OFFICE BOX 6342

 City-St-Zip:
 MARIANNA, FL 324476342 US

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL EVERETT SR. PRES 04/15/2010