

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010813

FILED
Apr 07, 2009
Secretary of State

Entity Name: CHURCH ON THE EDGE, INC.

Current Principal Place of Business:

1603 MICKLER AVE
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

PO BOX 770456
ORLANDO, FL 32877

New Mailing Address:

14100 ISLAMORADA DRIVE
ORLANDO, FL 32837

FEI Number: 43-2065045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINETTE, CHERYL
770456
ORLANDO, FL 32877 US

Name and Address of New Registered Agent:

PARRELLA, MICHAEL
13385 TWIN WOOD LANE
1609
ORLANDO, FL 32837 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: MICHAEL PARRELLA

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PINETTE, RICK
Address: PO BOX 770456
City-St-Zip: ORLANDO, FL 32877

Title: SD () Delete
Name: PINETTE, CHERYL
Address: PO BOX 770456
City-St-Zip: ORLANDO, FL 32877

Title: D () Delete
Name: FELSTEAD, FORREST
Address: PO BOX 770456
City-St-Zip: ORLANDO, FL 32877

Title: T () Delete
Name: ROGERS, CHARLES
Address: 415 ARBOR COURT
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: PARRELLA, MICHAEL
Address: P O BOX 770456
City-St-Zip: ORLANDO, FL 32877

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PINETTE, RICK
Address: 14100 ISLAMORADA DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: SD (X) Change () Addition
Name: PINETTE, CHERYL
Address: 14100 ISLAMORADA DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: D (X) Change () Addition
Name: FELSTEAD, FORREST
Address: 14100 ISLAMORADA DRIVE
City-St-Zip: ORLANDO, FL 32837

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

Title: D (X) Change () Addition
Name: PARRELLA, MICHAEL
Address: 13385 TWIN WOOD LANE, APT 1609
City-St-Zip: ORLANDO, FL 32837

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: MICHAEL PARRELLA

D

04/07/2009

Electronic Signature of Signing Officer or Director

Date