

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007646

FILED
Mar 18, 2009
Secretary of State

Entity Name: THE CHRISTIAN CLERGY ASSOCIATION, INC.

Current Principal Place of Business:

125 SW 8TH STREET
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

125 SW 8TH STREET
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 34-2046181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRIME, JOYCE
2511 BLACK OLIVE BLVD.
APT. D
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

PRIME, JOYCE
125 SW 8TH STREET
DELRAY BEACH, FL 33445 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: _____ 03/18/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MITCHELL, JR., MATTHEW REV.
Address: 324 NW 11TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP () Delete
Name: JOHNSON, LENARD C REV
Address: 40 NW 4TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: T () Delete
Name: JACKSON, JOHN REV
Address: 309 NW 7TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: OD () Delete
Name: WILDER, LORENZO REV
Address: 40 NW 4TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: OD () Delete
Name: JENKINS, WAYNE REV
Address: 125 SW 8TH STREET
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: OD () Delete
Name: MOORE, LINDA
Address: 94 S.W. 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: JENKINS, WAYNE REV
Address: 125 SW 8TH STREET
City-St-Zip: DELRAY BEACH, FL 33444 US

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: JOYCE A. PRIME MRS. 03/18/2009
Electronic Signature of Signing Officer or Director Date