2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008565

FILED Apr 02, 2009 Secretary of State

Entity Name: SUMMIT CHURCH OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
	NDON AVE D, FL 32803				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
	NDON AVE D, FL 32803				
FEI Number	:: 37-1464131 FE	El Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of Curre	ent Registered Agent:	Name and Addre	ss of New Registered Agent:	
735 HERN	JOSHUA J NDON AVE D, FL 32803 US				
	e named entity subn e of Florida.	nits this statement for the	purpose of changing its regis	tered office or registered agent, or both,	
SIGNATU	RE:				
	Electronic Si	ignature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	VD () Dele PARKER, JOHN T 130 TARPON CIRCL WINTER SPRINGS, I	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Γitle:	PD () Dele HUNTER, ISAAC J		Title: Name: Address:	() Change () Addition	
Name: Name: Address: City-St-Zip:	250 GLENRIDGE WAR		City-St-Zip:		
Name: Address: City-St-Zip: Fitle: Name: Address:	250 GLENRIDGE WA	32789 te W TRAIL	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	250 GLENRIDGE W/ WINTER PARK, FL : SD () Dele HUNTER, JOSH 1345 BLACK WILLO	32789 te W TRAIL GS, FL 32714 te N	Title: Name: Address:	() Change () Addition () Change () Addition	
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	250 GLENRIDGE W/WINTER PARK, FL: SD () Dele HUNTER, JOSH 1345 BLACK WILLO ALTAMONTE SPRING T () Dele HORTON, LEIGH ANI 1115 SEVILLE PLACE	32789 te W TRAIL GS, FL 32714 te N CE 14 te OSS WAY	Title: Name: Address: City-St-Zip: Title: Name: Address:		

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: JOHN PARKER MR. 04/02/2009