


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2008 8:00 am**  
**Secretary of State**

05-14-2008 90017 048 \*\*\*\*61.25

<b>DOCUMENT # N05000011126</b> 1. Entity Name <b>NOAH'S ARK NON-DENOMINATIONAL CHURCH, INC.</b>					
Principal Place of Business <b>744 NINTH STREET WINTER GARDEN, FL 34787</b>			Mailing Address <b>P.O. BOX 455 GROVELAND, FL 34736</b>		
2. Principal Place of Business - No P.O. Box # <b>938 West Broome St</b> Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State <b>CLERMONT FLA</b>		City & State		4. FEI Number <b>59-3819544</b>	
Zip <b>34711</b>		Country <b>LAKE</b>		Zip Country	
6. Name and Address of Current Registered Agent <b>BRODUS, CORNELIUS 360 FIRST AVE GROVELAND, FL 34736</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> <b>FL</b> Zip Code         </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
<b>Filing Fee is \$81.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BRODUS, CORNELIUS 360 FIRST AVENUE GROVELAND, FL 34736 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV BRODUS, LUCILLE 360 FIRST AVENUE GROVELAND, FL 34736 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT M FORREST, DONNA 1336 RAINTREE BLVD #304 CLERMONT, FL 34711 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BROWN, GREGORY J 11643 ROPER BLVD CLERMONT, FL 34711 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS FOUNTAIN, WANDA 2941 BURNING TREE COURT OVIEDO, FL 32765 <div style="text-align: right;"><input checked="" type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUSH, ROBERT L 1801 WESTERN LANE MASCOTTE, FL 34753 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Lucille Brodus</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/7/08 3524292691 <small>Date Daytime Phone #</small>		