

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05063

FILED
Mar 24, 2011
Secretary of State

Entity Name: CYPRESS MEADOWS COMMUNITY CHURCH OF THE CHRISTIAN & MISSIONARY ALLIANCE, INC.

Current Principal Place of Business:

2180 MCMULLEN-BOOTH RD
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

2180 MCMULLEN-BOOTH RD
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 59-2624337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, DOUGLAS D
1117 ARCHERS BEND
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

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: SP
Name: POOLE, DOUGLAS D.
Address: 1117 ARCHERS BEND
City-St-Zip: SAFETY HARBOR, FL 34695

Title: BMD
Name: LOGAN, CHRIS
Address: 208 HANCOCK CT.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: BMD
Name: GREGORICH, JAMES
Address: 215 LOTUS DR
City-St-Zip: SAFETY HARBOR, FL 34695

Title: BMD
Name: MEIER, ANDREW
Address: 109 S. MELVILLE AVE UNIT 2
City-St-Zip: TAMPA, FL 33606

Title: BMD
Name: GREENHALGH, SHARON
Address: 3201 SANDY RIDGE DR
City-St-Zip: CLEARWATER, FL 33761

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: SHARON GREENHALGH

TRES

03/24/2011

Electronic Signature of Signing Officer or Director

Date