## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000000878

RT FILED May 08, 2008 Secretary of State

Entity Name: IGNITED CHURCH, INC.					
Current Principal Place of Business:			New Princi	New Principal Place of Business:	
5859 HIGH\ LAKELAND	WAY 98 NORT , FL 33809	Ή			
Current Mailing Address:			New Mailing Address:		
5859 HIGHWAY 98 NORTH LAKELAND, FL 33809					
FEI Number:	20-4213105	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
STRADER, STEPHEN R 5859 HIGHWAY 98 NORTH LAKELAND, FL 33809 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:					
	Electronic	c Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () E FLUITT, CLARICI 1300 FINK'S HID MONROE, LA 71	EAWAY ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () E SEAMSTER, FRA 3355 OLD JONE FAIRBURN, GA	SBORO ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () E ZINK, PAUL D 2701 HODGES B JACKSONVILLE,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	P ( ) Change (X) Addition STRADER, STEPHEN R 2447 TAHOE DR LAKELAND, FL 33809	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	V () Change (X) Addition STRADER, JANICE A 2447 TAHOE DR LAKELAND, FL 33809	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition BARNES, PATSY 2809 HURST ROAD AUBURNDALE, FL 33823	

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: PATSY BARNES SECRETARY/TREASURER 0 05/08/2008