

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007264

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE CHURCH OF ARCADIA, INC.

Current Principal Place of Business:

200 W. OAK ST.
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

PO BOX 1733
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 20-5821080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUTZMAN, PHILLIP J REV.
1904 SE PEAR DR
ARCADIA, FL 34266 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: P/D () Delete
Name: STUTZMAN, PHILLIP J REV.
Address: 1904 SE PEAR DR
City-St-Zip: ARCADIA, FL 34266

Title: V/D () Delete
Name: STUTZMAN, LEIGH K.M.
Address: 1904 SE PEAR DR
City-St-Zip: ARCADIA, FL 34266

Title: D (X) Delete
Name: EMRICH, TODD
Address: 2879 MIRA LODA DR.
City-St-Zip: SARASOTA, FL 34240 US

Title: D (X) Delete
Name: SOMMERS, VERNAN
Address: 7150 RUSTIC ACRES
City-St-Zip: SARASOTA, FL 34241

Title: D (X) Delete
Name: STAUFFER, LLOYD
Address: 2505 BROWNING STREET
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PHILLIP J STUTZMAN

P/D

04/30/2008

Electronic Signature of Signing Officer or Director

Date