## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06410

FILED Feb 02, 2009 Secretary of State

Entity Name: SUNSHINE CHRISTIAN CHURCH OF ORANGE COUNTY, INC.

US

Current Principal Place of Business: New Principal Place of Business:

14465 VISTA DELLAGO BLVD WINTER GARDEN, FL 34787

Current Mailing Address: New Mailing Address:

14465 VISTA DEL LAGO BLVD. WINTER GARDEN, FL 347879316 US

FEI Number: 59-2732191 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERALEZ, GEORGE OWENS, JAMES L 14718 VISTA DEL LAGO BLVD 16660 RIALTO DR

WINTER GARDEN, FL 34787 US WINTER GARDEN, FL 34787 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: GLORIA EISOLD 02/02/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DTTR ( ) Delete Title: DTTR ( X) Change ( ) Addition

Name: PERALEZ, GEORGE Name: OWENS, JAMES L Address: 14718 VISTA DEL LAGO BLVD. Address: 16660 RIALTO DR

City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

Title: DTTR ( ) Delete Title: DTTR (X) Change ( ) Addition

Name: ANDERSON, MAX Name: ANDERSON, MAX N Address: 14127 VISTA DEL LAGO BLVD Address: 14127 VISTA DEL LAGO BLVD

Address: 14127 VISTA DEL LAGO BLVD Address: 14127 VISTA DEL LAGO BLVD
City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

Title: TRS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 EISOLD, GLORIA
 Name:

 Address:
 16664 RIALTO DR.
 Address:

 City-St-Zip:
 WINTER GARDEN, FL 34787
 City-St-Zip:

Title: SECY ( ) Delete Title: SECY (X) Change ( ) Addition

Name:SEIFORD, DONALDName:OWENS, JAMES LAddress:14312 VISTA DEL LAGO BLVDAddress:16660 RIALTO DR

City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

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: GLORIA EISOLD TRS. 02/02/2009