2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06670

FILED Feb 16, 2009 Secretary of State

Entity Name: STUART CONGREGATIONAL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 3110 SE ASTER LANE STUART, FL 34994 **Current Mailing Address: New Mailing Address:** 3110 SE ASTER LANE STUART, FL 34994 FEI Number: 65-0413387 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: CRARY, WILLIAM F. II 555 COLORADO AVE STUART, FL 34994 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WHALE, PEGGY Name: Name: 2950 SE OCEAN BLVD 109-2-1 Address: Address: City-St-Zip: STUART, FL 34996 City-St-Zip: Title: Title: (X) Change () Addition () Delete MUELLER, CAROLE Name: MUELLER, CAROLE Name: Address: 3002 FIVE IRON DR Address: 3002 FIVE IRON DRIVE City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952 Title: () Delete Title: (X) Change () Addition STRACUZZI, J. CHARLES STRACUZZI, J. CHARLES Name: Name: 3201 SE COURT DR. 3201 SE COURT DRIVE Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997 Title: () Delete Title: () Change () Addition Name: HASE, RANDALL Name: 1821 SW WILLOWBEND LANE Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: () Delete Title: (X) Change () Addition SKIDMORE, L. WARREN CIANCI, EVELYN Name: Name: 8161 SE PALM HAMMOCK LANE 6241 SE GEORGETOWN PLACE Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: HOBE SOUND, FL 33455 Title: () Delete Title: (X) Change () Addition MOORE, TONI MOORE, TOM D. Name: Name: Address: 1826 NW AUTTON BUSH DRIVE Address: 1826 NW BUTTONBUSH CIRCLE PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990 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: JC STRACUZZI T 02/16/2009