

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06718

FILED
Jan 21, 2009
Secretary of State

Entity Name: CHURCH OF THE RESURRECTION PARISH, INC.

Current Principal Place of Business:

66 8TH STREET
SHALIMAR, FL 32579 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 681
SHALIMAR, FL 32579 US

New Mailing Address:

FEI Number: 59-2714988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADDEN, ROBERT
511 MOONEY RD
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

TURCZYNSKI, RAYMOND JR.
229 CREWILLA DRIVE, NW
FORT WALTON BEACH, FL 32548 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: RAYMOND TURCZYNSKI, JR.

01/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: KINGMAN, DAVID
Address: 14 ELKWOOD COURT
City-St-Zip: SHALIMAR, FL 32579

Title: T () Delete
Name: POOR, ELIZABETH R
Address: 107 FULMAR CIRCLE NE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D () Delete
Name: HARDEN, WILLIAM D
Address: 1 BAY COVE LN
City-St-Zip: SHALIMAR, FL 32579

Title: D () Delete
Name: WHEELOCK, LAURIN
Address: 5955 OAK HILL RD
City-St-Zip: CRESTVIEW, FL 32536

Title: PD () Delete
Name: KENASTON, NANCY
Address: 24 NEPTUNE DRIVE
City-St-Zip: MARY ESTHER, FL 32569

Title: P () Delete
Name: LAMPLEY, JANE J
Address: 89 POQUITO RD
City-St-Zip: SHALIMAR, FL 32579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KINGMAN, DAVID R
Address: 14 ELKWOOD COURT
City-St-Zip: SHALIMAR, FL 32579

Title: V (X) Change () Addition
Name: SCHNEIDER, JASON
Address: 211A KELLY ROAD
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Change () Addition
Name: FORTNER, BARBARA
Address: 891 SHALIMAR COURT
City-St-Zip: SHALIMAR, FL 32579

Title: D (X) Change () Addition
Name: PADDEN, ROBERT
Address: 511 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S (X) Change () Addition
Name: TURCZYNSKI, CAROLEANN
Address: 229 CREWILLA DRIVE NW
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: P (X) Change () Addition
Name: LAMPLEY, JANE
Address: 89 POQUITO RD
City-St-Zip: SHALIMAR, FL 32579

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: CAROLEANN TURCZYNSKI

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01/21/2009

Electronic Signature of Signing Officer or Director

Date