2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000247

Entity Name: SANCTUARY CHURCH INC.

FILED Apr 30, 2009 Secretary of State

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

3055 N.E. 190TH ST. 19311 NE 18TH PLACE APT. 202 MIAMI, FL 33179

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

3055 N.E. 190TH ST. 19311 NE 18TH PLACE APT. 202 MIAMI, FL 33179 AVENTURA, FL 33180

FEI Number: 20-8584564 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:

SHIVER, SPENCER C
3055 N.E. 190TH ST.
APT. 202
AVENTURA, FL 33180 US

SHIVER, SPENCER C
19311 NE 18TH PLACE
MIAMI, FL 33179 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: SPENCER CLAY SHIVER 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: P (X) Change () Addition

 Name:
 SHIVER, SPENCER C
 Name:
 SHIVER, SPENCER C

 Address:
 3055 N.E. 190TH ST. APT. 202
 Address:
 19311 NE 18 PLACE

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 MIAMI, FL 33179

 $\label{eq:total_title} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 BRANNON, ROSS
 Name:

 Address:
 3055 N.E. 190TH ST. APT. 202
 Address:

 City-St-Zip:
 MIAMI, FL 33180
 City-St-Zip:

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

 Name:
 SHIVER, TYOMA A
 Name:
 SHIVER, TYOMA A

 Address:
 3055 N.E. 190TH ST. APT. 202
 Address:
 19311 NE 18 PLACE

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 MIAMI, FL 33179

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: SPENCER CLAY SHIVER P 04/30/2009