## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000005691

FILED Apr 10, 2009 Secretary of State

DOCUMENT# N0700005691				Secretary of State	
Entity Nan	ne: NOLAN F	RIDGE CHURCH INC.			
Current D	incinal Place	of Rucinoss	New Principal Place of	· Rusinass	
Current Principal Place of Business:			New Fillicipal Flace of	Dusilless.	
4801 LONG MAXVILLE	3 BRANCH R , FL 32234	OAD			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
744 GILLEN STREET			_		
JACKSON'	VILLE, FL 322	205			
FEI Number:	59-3558435	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
GRIFFIS, FREDDIE 4801 LONG BRANCH ROAD				18880 NORMANDY BLVD	
MAXVILLE	, FL 32234	US	MAXVILLE, FL 32234	US	
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: FREDDIE GRIFFIS				04/10/2009	
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	D ( GRIFFIS, FRE	) Delete	Title: ( Name:	) Change ( ) Addition	
Address:	18880 NORMA		Address:		
City-St-Zip:	JACKSONVILL	E, FL 32234	City-St-Zip:		
Title:		) Delete	Title: ( Name:	) Change ( ) Addition	
Name: Address:	HERRINGTON, 6907 W. BEAV		Address:		
City-St-Zip:	JACKSONVILL		City-St-Zip:		
Title:	D ( THOMAS, ROY	) Delete	,	) Change ( ) Addition	
Name: Address:	7606 S. W.130		Name: Address:		
City-St-Zip:	STARKE, FL 3		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: FREDDIE GRIFFIS D 04/10/2009