2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006147

FILED Apr 25, 2008 Secretary of State

Entity Name: CORNERSTONE CHRISTIAN COMMUNITY CHURCH INC.

Current Principal Place of Business: New Principal Place of Business: 949 ANDRSON RIVE 1301 FERENDINA DRIVE DELTONA, FL 32725 DELTONA, FL 32725 **Current Mailing Address: New Mailing Address:** P.O. BOX 5735 DELTONA, FL 32728 FEI Number: 45-0566790 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: DUBOULAY, MARILYN L DUBOULAY, MARILYN L 949 ANDERSON DRIVE 1301 FERENDINA DRIVE DELTONA, FL 32725 DELTONA, FL 32725 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: MARILYN L. DUBOULAY 04/25/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DUBOULAY, JEAN C DUBOULAY, JEAN C Name: Name: 949 ANDERSON DRIVE Address: 1301 FERENDINA DRIVE Address: City-St-Zip: DELTONA, FL 32725 City-St-Zip: DELTONA, FL 32725 Title: () Delete Title: (X) Change () Addition DUBOULAY, MARILYN L Name: DUBOULAY, MARILYN L Name: Address: 949 ANDERSON DRIVE Address: 1301 FERENDINA DRIVE City-St-Zip: DELTONA, FL 32725 City-St-Zip: DELTONA, FL 32725 Title: SEC. () Delete Title: () Change () Addition MAXEY, IRENE P Name: Name: 1011 THIRD NORTH STREET Address: Address: City-St-Zip: VICKSBURG, MS 39183 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: BEALEY, JONATHON C 6149 METRO WEST BLVD Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32835 US Title: () Delete Title: () Change (X) Addition BEALEY, CHAVANDA Name: Name: 6149 METRO WEST BLVD Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32835 US

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: MARILYN L. DUBOULAY **VP** 04/25/2008