

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009005

FILED
Mar 24, 2008
Secretary of State

Entity Name: THE ORCHARD COMMUNITY CHURCH, INC.

Current Principal Place of Business:

694 SW MAIN BLVD
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

694 SW MAIN BLVD
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 26-1083361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLALOCK, EDDIE
502 EAST BAY ST
PERRY, FL 32347 US

Name and Address of New Registered Agent:

FEDERICO, MICHAEL
212 SW ACE LANE
LAKE CITY, FL 32025 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: MICHAEL FEDERICO

03/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLALOCK, EDDIE
Address: 502 EAST BAY ST
City-St-Zip: PERRY, FL 32347

Title: V () Delete
Name: FEDERICO, MICHAEL
Address: 212 SW ACE LANE
City-St-Zip: LAKE CITY, FL 32025

Title: S () Delete
Name: MC MULLEN, L.L.
Address: 25275 77TH RD
City-St-Zip: O'BRIEN, FL 32071

Title: D () Delete
Name: BARTON, SCOTT
Address: 263 SPRINGHILL RD
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: OWENS, MILES
Address: 1230 PAUL POPPELL ROAD
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: KIRBY, HAROLD
Address: 863 SE MONROE ST
City-St-Zip: LAKE CITY, FL 32025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLALOCK, EDDIE
Address: 203 NE 9TH AVE
City-St-Zip: LAKE BUTLER, FL 32054

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CAMP, VINCE
Address: 215 SW BLACK PINE TERRACE
City-St-Zip: LAKE CITY, FL 32024

Title: D (X) Change () Addition
Name: HANNA, CATHERINE
Address: 28062 35TH PATH
City-St-Zip: BRANFORD, FL 32008

Title: () Change () Addition
Name:
Address:
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: MICHAEL FEDERICO

V

03/24/2008

Electronic Signature of Signing Officer or Director

Date