

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009555

FILED
Jun 16, 2009
Secretary of State

Entity Name: DEEP CREEK WORSHIP CENTER, INC.

Current Principal Place of Business:

403 E PINE ST
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

403 E PINE ST
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 26-1139446 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRANCH, WALTER T
403 E PINE ST
ARCADIA, FL 34266 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRANCH, WALTER T
Address: 403 E PINE ST
City-St-Zip: ARCADIA, FL 34266

Title: VP () Delete
Name: BRANCH, LINDA S
Address: 403 E PINE ST
City-St-Zip: ARCADIA, FL 34266

Title: S () Delete
Name: POGUE, DONALD
Address: 26060 TEMPLAR LANE
City-St-Zip: PUNTA GORDA, FL 33983

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: GOMEZ, CARL D
Address: 26170 MAMORA DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

Title: D () Change (X) Addition
Name: WICKEY, ALLEN D
Address: 7895 NE HWY 17
City-St-Zip: ARCADIA, FL 34266

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: BRANCH, WALTER T

P

06/16/2009

Electronic Signature of Signing Officer or Director

Date