

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009684

Entity Name: ELEVATE CHURCH, INC.

FILED
Mar 20, 2008
Secretary of State

Current Principal Place of Business:

1101 OAK POND DRIVE
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

PO BOX #690776
ORLANDO, FL 328690776

New Mailing Address:

FEI Number: 26-1174622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPULER, JONATHAN
1101 OAK POND DRIVE
CELEBRATION, FL 34747 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: S () Delete
Name: PRASSE, KRIS
Address: 4405 ANDALUSIA DRIVE
City-St-Zip: AUSTIN, TX 78759

Title: T () Delete
Name: SPULER, JENNIFER
Address: 1101 OAK POND DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: PD () Delete
Name: PRASSE, JONATHAN
Address: 1101 OAK POND DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: MCCLELLAN, EARL
Address: 9513 STANWICH DRIVE
City-St-Zip: AUSTIN, TX 78717

Title: D () Delete
Name: MATA, SARN
Address: 8122 DARWIN COVE
City-St-Zip: AUSTIN, TX 78729

Title: D () Delete
Name: GOODEN, NATHAN
Address: 9210 WHITE EAGLE CT.
City-St-Zip: RALEIGH, NC 27617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: PRASSE, KRIS
Address: 14841 OLD THICKET TRACE
City-St-Zip: WINTER GARDEN, FL 34787

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

Title: PD (X) Change () Addition
Name: SPULER, JONATHAN
Address: 1101 OAK POND DRIVE
City-St-Zip: CELEBRATION, FL 34747

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

Title: D (X) Change () Addition
Name: MATA, SAM
Address: 8122 DARWIN COVE
City-St-Zip: AUSTIN, TX 78729

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: JONATHAN SPULER

PD

03/20/2008

Electronic Signature of Signing Officer or Director

Date