2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N07000011710

Entity Name: CHURCH OF SALVATION, INC.

Current Principal Place of Business:

405 SPRINGVIEW DRIVE
SANFORD, FL 32773 US

New Principal Place of Business:

Current Mailing Address:

405 SPRINGVIEW DRIVE
SANFORD, FL 32773 US

New Mailing Address:

FEI Number: 26-1763395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

TROTTER, NIKKI A
405 SPRINGVIEW DRIVE
SANFORD
FLORIDA, FL 32773 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: NIKKI A. TROTTER 04/29/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TROTTER, RICHARD
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: D ( ) Delete
Name: TROTTER, RICHARD
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: V ( ) Delete
Name: TROTTER, NIKKI JR
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: S ( ) Delete
Name: TROTTER, NIKKI
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: D ( ) Delete
Name: TROTTER, NIKKI
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: T ( ) Delete
Name: JACKSON, JANNETTE
Address: 2214 S RIO GRANDE, APT 166
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TROTTER, RICHARD E JR
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: D (X) Change ( ) Addition
Name: TROTTER, RICHARD E JR
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

Title: V (X) Change ( ) Addition
Name: TROTTER, NIKKI
Address: 405 SPRINGVIEW DRIVE
City-St-Zip: SANFORD, FL 32773

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

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

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: NIKKI A. TROTTER VP 04/29/2009
Electronic Signature of Signing Officer or Director Date