2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000219

FILED Jun 04, 2009 Secretary of State

Entity Name: CHRIST THE KING ANGLICAN CHURCH OF OCALA, INC. **Current Principal Place of Business:** New Principal Place of Business: 1136 NE 14TH STREET 3850 WEST ANTHONY RD OCALA, FL 34470 OCALA, FL 34475 **Current Mailing Address: New Mailing Address:** 1136 NE 14TH STREET 3850 WEST ANTHONY RD OCALA, FL 34470 OCALA, FL 34475 FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent: CROSS, R. SCOTT 108 NORTH MAGNOLIA AVENUE, STE 101 OCALA, FL 34475 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CROSS, R. SCOTT Name: Name: Address: 108 N MAGNOLIA AVE STE 101 Address: City-St-Zip: OCALA, FL 34475 City-St-Zip: Title: () Delete Title: (X) Change () Addition SIMONS, GARY C Name: Name: CURRAN, DONALD J Address: 121 NW THIRD ST Address: 4734 SE 31ST ST City-St-Zip: OCALA, FL 34475 City-St-Zip: OCALA, FL 34480 Title: () Delete Title: (X) Change () Addition HERREN, WESLEY WILKERSON, JAMES Name: Name: 1136 NE 14TH ST 1027 SE 5TH ST Address: Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: OCALA, FL 34471

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: DONALD J. CURRAN JR. PD 06/04/2009