2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000704

TAMPA, FL 33612

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

Entity Nar	me: EGLISE	THEOPHILE, INC.			
Current Principal Place of Business:				New Principal Place of Business:	
12811 N NEBRASKA AVE SUITE E TAMPA, FL 33612				12811 N NEBRASKA AVE SUITE J TAMPA, FL 33612	
Current Mailing Address:				New Mailing Address:	
12811 N NEBRASKA AVE SUITE E TAMPA, FL 33612				12811 N NEBRASKA AVE SUITE J TAMPA, FL 33612	
FEI Number: 33-1201266 FEI Number Applied For () FEI N			FEI Nur	nber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
TAMPA, Fi	JTH PLACE L 33604 US		purpose c	f changing its registere	ed office or registered agent, or both,
SIGNATUR					
Electronic Signature of Registered Agent					Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (COMICE, YVOI 8709 N RUTH F TAMPA, FL 33	PLACE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (NOEL, JEAN W 10926 N HYAC TAMPA, FL 33	INTH AVE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	S (LAFOSSE, BEI 13215N 15TH S			Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: YVON COMICE P 04/29/2009