

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001713

FILED
Apr 30, 2009
Secretary of State

Entity Name: DEEPER LIFE CHRISTIAN CENTER, INC.

Current Principal Place of Business:

2522 NE CAPITAL CIRCLE
SUITE 6
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2522 NE CAPITAL CIRCLE
SUITE 6
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 26-1949877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGELA MOSS POOLE LLC
118 SALEM COURT
TALLAHASSEE, FL 32301 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: RICH, DARRIN
Address: 2522 NE CAPITAL CIRCLE, SUITE 6
City-St-Zip: TALLAHASSEE, FL 32308

Title: VST () Delete
Name: MOORE-RICH, EMILY
Address: 2522 NE CAPITAL CIRCLE, SUITE 6
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: JEFFERSON, MB
Address: 3300 N NEBRASKA AVE.
City-St-Zip: TAMPA, FL 33603

Title: D () Delete
Name: POOLE, COREY
Address: P.O. BOX 4045
City-St-Zip: TALLAHASSEE, FL 32315

Title: D () Delete
Name: EGGLESTON, DAVID
Address: P.O. BOX 180875
City-St-Zip: TALLAHASSEE, FL 32317

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: () 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: EMILY MOORE

VST

04/30/2009

Electronic Signature of Signing Officer or Director

Date