2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001974

Entity Name: PINE ISLAND COMMUNITY CHURCH INC.

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5360 RIDGEWOOD DR. BOKEELIA, FL 33922

Current Mailing Address: New Mailing Address:

P.O. BOX 375 BOKEELIA, FL 33922

FEI Number: 77-0714554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BERLANTI, RICHARD
5491 MARINA DR.
BOKEELIA, FL 33922 US
GRUESER, HEIDI R
10191 STRINGFELLOW ROAD
ST JAMES, FL 33956 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: HEIDI R. GRUESER 01/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BERLANTI, RICHARD Name: COX, KENNETH D

Address: 5491 MARINA DR. Address: 10191 STRINGFELLOW ROAD
City-St-Zip: BOKEELIA, FL 33922 City-St-Zip: ST JAMES, FL 33956

Title: VP () Delete Title: VP (X) Change () Addition Name: HONC, PENNY J Name: TOLLIVER, CINDEE

 Name:
 HONC, PENNY J
 Name:
 TOLLIVER, CINDEE

 Address:
 7015 HOWARD RD.
 Address:
 1210 S.W. FIRST PLACE

 City-St-Zip:
 BOKEELIA, FL 33922
 City-St-Zip:
 CAPE CORAL, FL 33991

Title: S () Delete Title: S (X) Change () Addition

 Name:
 CICORIA, VIRGINIA
 Name:
 DUCKMANN, KENNETH

 Address:
 11450 ARGENTINE CT.
 Address:
 2498 SAPODILLA LANE

 City-St-Zip:
 BOKEELIA, FL 33922
 City-St-Zip:
 ST JAMES, FL 33956

 Name:
 WAITE, PATRICIA
 Name:
 MAYHEW, RON

 Address:
 5647 BIRDSONG LANE
 Address:
 3651 CATAMARAN LANE

 City-St-Zip:
 BOKEELIA, FL 33922
 City-St-Zip:
 ST JAMES, FL 33956

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: KENNETH D. COX P 01/27/2009