2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# N08000005580

Entity Name: RIVER OF LIFE ASSEMBLY OF GOD, ALACHUA, INC.

Current Principal Place of Business:

14200 NW 148TH PLACE
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

PO BOX 1708
ALACHUA, FL 32616

New Mailing Address:

FEI Number: 59-3587488 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EVANS, GREGORY A
5270 NE C.R. 340
HIGH SPRINGS, FL 32643 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:	RABURN, TERRY R	
Address:	1437 EAST MEMORIAL BLVD.	
City-St-Zip:	LAKELAND, FL 33801	
Title:	VP	( ) Delete
Name:	POWELL, STEVE L	
Address:	1437 EAST MEMORIAL BLVD.	
City-St-Zip:	LAKELAND, FL 33801	
Title:	SEC.	( ) Delete
Name:	LASTINGER, ARNOLD L	
Address:	1443 NW 98TH TER.	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	DIR.	( ) Delete
Name:	EVANS, GREGORY A	
Address:	5270 NE C.R. 340	
City-St-Zip:	HIGH SPRINGS, FL 32643	
Title:	DIR.	( ) Delete
Name:	WHITE, GEORGE A	
Address:	12023 NW 197TH TER.	
City-St-Zip:	ALACHUA, FL 32615	
Title:	DIR.	( ) Delete
Name:	HARRELSON, DONALD F	
Address:	20002 NW 131ST PLACE	
City-St-Zip:	ALACHUA, FL 32615	

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:	
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: GREGORY A. EVANS DIR 04/20/2009

Electronic Signature of Signing Officer or Director — Date