## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000006630

FILED Jun 30, 2009 Secretary of State

Entity Name: REDEMPTION CHRISTIAN CHURCH OF INVERNESS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1906 FLAME BUSH TERRACE INVERNESS, FL 34453 **Current Mailing Address: New Mailing Address:** 1906 FLAME BUSH TERRACE P.O. BOX 2241 INVERNESS, FL 34453 INVERNESS, FL 34451 FEI Number: 26-3008047 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) 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: LAUGHREY, JAMES 1906 FLAMÉ BUSH TERRACE INVERNESS, FL 34453 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: () Delete ( ) Change (X) Addition LANGDON, TODD Name: Name: Address: Address: 6501 MOCKINGBIRD LANE E City-St-Zip: City-St-Zip: INVERNESS, FL 34452 Title: Title: ( ) Change (X) Addition ( ) Delete LAUGHREY, JAMES Name: Name: Address: Address: 1906 FLAME BUSH TERRACE City-St-Zip: City-St-Zip: INVERNESS, FL 34453 Title: () Delete Title: ( ) Change (X) Addition LEEPER, PAUL 11 Name: Name: 2918 W. ESCAMBIA LANE Address: Address: City-St-Zip: City-St-Zip: LECANTO, FL 34461 Title: () Delete Title: ( ) Change (X) Addition Name: Name: BRAYMAN, WALTER 5505 S. STONERIDGE DR. Address: Address: City-St-Zip: City-St-Zip: INVERNESS, FL 34450

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: WALTER BRAYMAN T 06/30/2009