

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 10, 2009
Secretary of State**

DOCUMENT# N08000007052

Entity Name: WESTSIDE CHRISTIAN ASSEMBLY INC.

Current Principal Place of Business:

6102 FILLMORE ST
HOLLYWOOD, FL 33024

New Principal Place of Business:

New Mailing Address:

3908 LYMESTONE DR.
COOPER CITY, FL 33026 10

Current Mailing Address:

6102 FILLMORE ST
HOLLYWOOD, FL 33024

FEI Number: 26-3092715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

LOVINS, DOUGLAS R
3908 LYMESTONE DR
COOPER CITY, FL 33026 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOVINS, DOUGLAS R
Address: 6102 FILLMORE ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: P (X) Change () Addition
Name: LOVINS, DOUGLAS R
Address: 3908 LYMESTONE DR.
City-St-Zip: COOPER CITY, FL 33026

Title: ST () Delete
Name: LOVINS, LINDA A
Address: 6102 FILLMORE ST
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP (X) Change () Addition
Name: CAMPBELL, ELI
Address: 6137 DAWSON ST.
City-St-Zip: HOLLYWOOD, FL 33023

Title: () Delete
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: CAMPBELL, LABELL
Address: 6731 JOHNSON ST.
City-St-Zip: HOLLYWOOD, FL 33024

Title: () Delete
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: ROBERTS, ARTIE MAE
Address: 5815 BUCHANAN ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Delete
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: GRAYBEAL, PERSHETTA
Address: 29 BLUEBIRD AVE.
City-St-Zip: HOLLYWOOD, FL 33023

Title: () Delete
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: SMITH, BETTY
Address: 4329 S.W.49 CT.
City-St-Zip: FT. LAUDERDALE, FL 33314

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: DOUGLAS R. LOVINS

P

05/10/2009

Electronic Signature of Signing Officer or Director

Date