

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009501

FILED
Apr 02, 2009
Secretary of State

Entity Name: LONG BEACH HOLINESS CHURCH INC.

Current Principal Place of Business:

160-A RUSTY GANS DRIVE
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

160-A RUSTY GANS DRIVE
PANAMA CITY BEACH, FL 32408

New Mailing Address:

FEI Number: 26-3539000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHILLINGER, STEVEN D
160-A RUSTY GANS DRIVE
PANAMA CITY BEACH, FL 32408 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: WATKINS, JAMES O
Address: 11423 EAST CHURCH ROAD
City-St-Zip: EBRO, FL 32437

Title: VP () Delete
Name: GARCIA, BERTHA I
Address: 1907 NORTH DOROTHY AVE.
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: T () Delete
Name: SCHILLINGER, STEVEN D
Address: 160-A RUSTY GANS DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: S () Delete
Name: ARMISTEAD, DEBRA M
Address: 1908 NORTH DOROTHY AVE.
City-St-Zip: PANAMA CITY BEACH, FL 32407

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:

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: STEVEN D SCHILLINGER

TRES

04/02/2009

Electronic Signature of Signing Officer or Director

Date