

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000697

FILED
Apr 29, 2010
Secretary of State

Entity Name: PLANT CITY CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1214 W. REYNOLDS ST.,STE. 2
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

1214 W. REYNOLDS ST.,STE. 2
PLANT CITY, FL 33563

New Mailing Address:

117 S. ALEXANDER
305
PLANT CITY, FL 33562

FEI Number: 90-0445086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERS, C. REGINALD
3302 KILMER DR.
PLANT CITY, FL 33566 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
Name: RIVERS, C. REGINALD PRES
Address: 3302 KILMER DR.
City-St-Zip: PLANT CITY, FL 33566

Title: S
Name: RIVERS, PAULINE VP SECT
Address: 3302 KILMER DR.
City-St-Zip: PLANT CITY, FL 33566

Title: D
Name: NICHOLSON, STEVEN PASTOR
Address: 112 13TH ST.
City-St-Zip: BELLAIR BEACH, FL 33786

Title: D
Name: KEEN, ELDEN TREASUR
Address: 8338 NW 8TH TERRACE
City-St-Zip: BOCA RATON, FL 33487

Title: D
Name: GODFREY, DEWAINE
Address: 171 OVERBROOK BLVD.-A
City-St-Zip: LARGO, FL 33770

I hereby 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 all other like empowered.

SIGNATURE: C. REGINALD RIVERS

PRES

04/29/2010

Electronic Signature of Signing Officer or Director

Date