

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11069

FILED
Apr 10, 2008
Secretary of State

Entity Name: PALM BEACH COMMUNITY CHURCH, INC.

Current Principal Place of Business:

3970 RCA BLVD SUITE 7009
PALM BCH GARDENS, FL 33410

New Principal Place of Business:

4901 PGA BLVD
PALM BCH GARDENS, FL 33418

Current Mailing Address:

3970 RCA BLVD SUITE 7009
PALM BCH GARDENS, FL 33410

New Mailing Address:

4901 PGA BLVD
PALM BCH GARDENS, FL 33418

FEI Number: 59-2576297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONNEALY, PAUL
17 CAMBRIA RD. E
PALM BEACH GARDENS, FL 33418 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: PD () Delete
Name: UNDERWOOD, RAYMOND E
Address: 268 COCOPLUM DR. N
City-St-Zip: JUPITER, FL 33458

Title: SD () Delete
Name: CONNEALY, PAUL
Address: 17 CAMBRIA RD. E
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: BRADBURY, JILL
Address: 6681 140TH LANE NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: UNDERWOOD, RAYMOND E DR
Address: 268 COCOPLUM DR. N
City-St-Zip: JUPITER, FL 33458

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: DR. RAYMOND UNDERWOOD

PD

04/10/2008

Electronic Signature of Signing Officer or Director

Date