

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12312

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: HOLY INNOCENTS CHURCH

## Current Principal Place of Business:

604 N. VALRICO RD  
VALRICO, FL 33594 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 249  
VALRICO, FL 33595 US

## New Mailing Address:

604 N. VALRICO RD.  
VALRICO, FL 33594 US

FEI Number: 59-2346954

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHARF, DOUGLAS  
604 N. VALRICO RD.  
VALRICO, FL 33594 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: SCHARF, DOUGLAS  
Address: 3714 CRYSTAL DEW ST  
City-St-Zip: PLANT CITY, FL 33567

Title: TD ( ) Delete  
Name: MORE, BOB  
Address: 13027 ST FILAGREE DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: DS ( ) Delete  
Name: POST, TRINA  
Address: 2713 CRESTFIELD DR  
City-St-Zip: VALRICO, FL 33596

Title: S ( ) Delete  
Name: SOTO, SHARON  
Address: 115 MARY KAY CT  
City-St-Zip: BRANDON, FL 33511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: MORE, ROBERT  
Address: 13027 ST FILAGREE DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: MAGNANT, PATRICIA  
Address: 4006 WATER PARK CT.  
City-St-Zip: RIVERVIEW, FL 33569

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 SCHARF

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date