

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14942

FILED  
Apr 07, 2009  
Secretary of State

**Entity Name:** FAITH EVANGELICAL FREE CHURCH OF SPRING HILL, INC.

**Current Principal Place of Business:**

5338 FREEPORT DR.  
SPRING HILL, FL 346061218 US

**New Principal Place of Business:**

**Current Mailing Address:**

5338 FREEPORT DR  
SPRING HILL, FL 346061218 US

**New Mailing Address:**

**FEI Number:** 59-2712250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDGAR, MENCE  
7418 DUNDEE WAY  
WEEKI WACHEE, FL 34613 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: VP ( ) Delete  
Name: LUDDEKE, DANIEL  
Address: 289 SILAS COURT  
City-St-Zip: SPRING HILL, FL 34609

Title: PD ( ) Delete  
Name: EDGAR, MENCE  
Address: 7418 DUNDEE WAY  
City-St-Zip: WEEKI WACHEE, FL 34613

Title: TD ( ) Delete  
Name: HALLBERG, JOHN P  
Address: 4651 LISETTE CIRCLE  
City-St-Zip: BROOKSVILLE, FL 34604

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TD (X) Change ( ) Addition  
Name: CASSARA, FRANK P  
Address: 9391 BRADY ST.  
City-St-Zip: SPRING HILL, FL 34608

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: FRANK P. CASSARA

TD

04/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date