

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90015 010 ****61.25

DOCUMENT # N15902

1. Entity Name
DANVILLE CHURCH OF CHRIST, INCORPORATED



Principal Place of Business
**8704 SW SR 121
LAKE BUTLER, FL 32054 US**

Mailing Address
**8704 SW SR 121
LAKE BUTLER, FL 32054 US**

40102072



04212008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BLACKWELDER, CHARLES
4905 SW CR 18-A
LAKE BUTLER, FL 32054**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
BLACKWELDER, CHARLES T
4905 SW CR 18-A
LAKE BUTLER, FL 32054**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
RHODEN, ELIJAH
3112 SE 120TH ST
STARKE, FL 32091**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
DAVIS, JOHN H JR
PO BOX 262
LA CROSSE, FL 32658**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TR
DAVIS, JOHN H III
4699 SW CR 18A
LAKE BUTLER, FL 32054**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elijah Rhoden **ELIJAH RHODEN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER

4/25/08
Date

368-8189
Daytime Phone #