## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22970

Apr 27, 2009 Secretary of State

Entity Name: CHRIST PRESBYTERIAN CHURCH (U.S.A.), INC.

**Current Principal Place of Business: New Principal Place of Business:** 3115 DRYER AVENUE LARGO, FL 337704269 US **Current Mailing Address: New Mailing Address:** 3115 DRYER AVENUE LARGO, FL 337704269 US FEI Number: 59-1036948 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HODGES, LEE HODGES, LEE 11183 110TH AVE N 14422 KANDI COURT LARGO, FL 33774 LARGO, FL 33774 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: 04/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete SARINE, CARL SHELDON, RICHARD Name: Name: 709 GROVEWOOD LANE Address: 1100 S. BELCHER ROAD #303 Address: City-St-Zip: LARGO, FL 33770 City-St-Zip: LARGO, FL 33771 Title: PD Title: ( ) Delete () Change () Addition HODGES, LEE Name: Name: Address: 14422 KANDI COURT Address: City-St-Zip: LARGO, FL 33774 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition COVELL, PETER Name: STEPHENS, WILLIAM Name:

Title: () Delete Name:

SD

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

127 CRESTWOOD LN

() Delete

LARGO, FL 33770

HODGES, NANCY

LARGO, FL 33774

14422 KANDI COURT

Title: PΠ ( ) Change (X) Addition Name: HODGES, LEE 14422 KANDI COURT Address: Address: City-St-Zip: City-St-Zip: LARGO, FL 33774

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

1616 ST. PAULS DRIVE

CLEARWATER, FL 33764

() Change () Addition

SIGNATURE: LEE HODGES PD 04/27/2009