2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# N22995

Entity Name: THE CHURCH OF THE ADVENT INC.

Current Principal Place of Business:

4885 S.W. HONEY TERRACE
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

4885 S.W. HONEY TERRACE
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 65-0008233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BASS, KATHRYN
2380 SW FOXPOINT WAY
PALM CITY, FL 34990 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: HOTTE, ELEANOR
Address: 2000 SW CIMMARRON
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete
Name: MCCOWAN, STEVEN
Address: 1995 SW ST. ANDREWS DR
City-St-Zip: PALM CITY, FL 34990

Title: TD ( ) Delete
Name: IRELAND, ARIC
Address: 1701 SW WATERFALL BLVD
City-St-Zip: PALM CITY, FL 34990

Title: SD ( ) Delete
Name: IRELAND, ARIC
Address: 1701 SW WATERFALL BLVD
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: HOTTE, ELEANOR
Address: 2000 SW CIMMARRON
City-St-Zip: PALM CITY, FL 34990

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

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

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

Title: PD ( ) Change (X) Addition
Name: SHIRES, ROBERT A THE REV
Address: 10860 TAMORON DRIVE
City-St-Zip: BOCA RATON, FL 33498

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: ARIC A IRELAND SD 03/02/2009

Electronic Signature of Signing Officer or Director — Date