

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 28, 2009**  
**Secretary of State**

DOCUMENT# N24975

**Entity Name:** FELLOWSHIP CHURCH OF HIGH SPRINGS, INC.**Current Principal Place of Business:**16916 NW US HWY 441  
HIGH SPRINGS, FL 32643 US**New Principal Place of Business:****Current Mailing Address:**16916 NW US HWY 441  
HIGH SPRINGS, FL 32643 US**New Mailing Address:****FEI Number:** 59-2876106**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BLALOCK, LARRY  
12402 NORTHWEST 116 PLACE  
ALACHUA, FL 32615 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:** P ( ) Delete  
**Name:** STEGER, TERRY  
**Address:** 14930 NW 145TH TERR  
**City-St-Zip:** ALACHUA, FL 32615**Title:** VP ( ) Delete  
**Name:** CRAWFORD, REBECCA K  
**Address:** 7045 SW 41ST LANE  
**City-St-Zip:** LAKE BUTLER, FL 32054**Title:** T ( ) Delete  
**Name:** BLALOCK, LARRY  
**Address:** 12402 NW 116 PLACE  
**City-St-Zip:** ALACHUA, FL 32615**Title:** S ( ) Delete  
**Name:** HOSEY, KELLI  
**Address:** 22318 NW 188TH STREET  
**City-St-Zip:** HIGH SPRINGS, FL 32643**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change ( ) Addition  
**Name:** SMITH, JOE  
**Address:** 26126 NW 182ND AVE  
**City-St-Zip:** HIGH SPRINGS, FL 32643**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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: JOE SMITH

P

07/28/2009

Electronic Signature of Signing Officer or Director

Date