2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25976

Entity Name: CHRISTIAN WORSHIP CENTER, INC.

Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O REV. STEVEN J. TAYLOR 3922 COASTAL HIGHWAY

3922 COASTAL HWY CRAWFORDVILLE, FL 32327 US CRAWFORDVILLE, FL 32327 US

New Mailing Address: Current Mailing Address:

CHRISTIAN WORSHIP CENTER, INC 3922 COASTAL HIGHWAY

CRAWFORDVILLE, FL 32327 3922 COASTAL HWY US CRAWFORDVILLE, FL 32327

FEI Number: 59-2885951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

TAYLOR, STEVEN J TAYLOR, STEVEN J HD 2481 COASTAL HWY 3926 COASTAL HIGHWAY

CRAWFORDVILLE, FL 32327 US US CRAWFORDVILLE, FL 32327

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: STEVEN J. TAYLOR 04/27/2009

Electronic Signature of Registered Agent Date

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

() Delete (X) Change () Addition

TAYLOR, STEVEN J TAYLOR, STEVEN J Name: Name: 3926 COASTAL HWY Address: 3926 COASTAL HWY Address:

City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: Title: (X) Change () Addition () Delete BLACKMON, BARNEY Name: BLACKMON, BARNEY Name:

Address: PO BOX 154 N/A Address: PO BOX 154 N/A City-St-Zip: PANACEA, FL 32347 City-St-Zip: PANACEA, FL 32347 US

Title: () Delete Title: (X) Change () Addition

TAYLOR, MALISSA TAYLOR, MALISSA Name: Name: 3926 COASTAL HWY Address: Address: 3926 COASTAL HWY

City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: () Delete Title: (X) Change () Addition

Name: TOBELL, VICKY Name: TOBELL, VICKY Address: 52 HOLIDAY DR. Address: 52 HOLIDAY DR.

City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: () Delete Title: (X) Change () Addition

BLACKMON, M. VONNIECIEL BLACKMON, M. VONNIECIEL Name: Name:

P O BOX 154 N/A P O BOX 154 N/A Address: Address: City-St-Zip: PANACEA, FL City-St-Zip: PANACEA, FL 32346 US

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: STEVEN J. TAYLOR HD 04/27/2009