# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 22, 2009**
**Secretary of State**

DOCUMENT# N39094

**Entity Name:** WHOLE LOAF CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

806 FORREST AVENUE
COCOA, FL 32922

**New Principal Place of Business:**

**Current Mailing Address:**

806 FORREST AVENUE
COCOA, FL 32922

**New Mailing Address:**

**FEI Number: 59-3193679** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

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

FADELY, ANTHONY B
806 FORREST AVENUE
COCOA, FL 32922 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: FADELY, ANTHONY B
Address: 809 N. INDIAN RIVER DR.
City-St-Zip: COCOA, FL 32922

Title: VPD ( ) Delete
Name: COOPER, DAVID
Address: 2600 LYNWOOD PL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: STD ( ) Delete
Name: FADELY, VERA
Address: 809 INDIAN RIVER DR
City-St-Zip: COCOA, FL 32922

Title: DIR ( ) Delete
Name: BAWGUS, WILLIAM A
Address: 25 LITTLE JOHN LA
City-St-Zip: ROCKLEDGE, FL 32955

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

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: ( ) 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: ANTHONY B. FADELY PRES 07/22/2009
Electronic Signature of Signing Officer or Director — Date