

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 18, 2009
Secretary of State

DOCUMENT# N40500

Entity Name: SUNLIGHT COMMUNITY CHURCH OF PORT ST. LUCIE, INC.**Current Principal Place of Business:**% SCOTT VANDER PLOEG
477 SW CASHMERE BLVD
PORT SAINT LUCIE, FL 34986 US**New Principal Place of Business:****Current Mailing Address:**% SCOTT VANDER PLOEG
477 SW CASHMERE BLVD
PORT SAINT LUCIE, FL 34986 US**New Mailing Address:****FEI Number:** 65-0074763**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMIT, JAY
477 SW CASHMERE BLVD
PORT SAINT LUCIE, FL 34986 US**Name and Address of New Registered Agent:**SMIT, JACOB J PRES
477 SW CASHMERE BLVD
PORT SAINT LUCIE, FL 34986 US

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: JACOB J SMIT

02/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PRES () Delete
Name: SMIT, JAY
Address: 477 SW CASHMERE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986Title: VP () Delete
Name: COREY, HAMILTON
Address: 477 SW CASHMERE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986Title: S () Delete
Name: MURRAY, PAT
Address: 477 SW CASHMERE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PRES (X) Change () Addition
Name: SMIT, JACOB J PRES
Address: 477 SW CASHMERE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986Title: VP (X) Change () Addition
Name: COREY, HAMILTON VP
Address: 477 SW CASHMERE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986Title: SEC (X) Change () Addition
Name: MURRAY, PATRICIA R SEC
Address: 477 SW CASHMERE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: JACOB J SMIT

PRES

02/18/2009

Electronic Signature of Signing Officer or Director

Date