

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42110

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: CHURCH OF THE ADVENT OF S.W. OCALA, INC.

**Current Principal Place of Business:**

11251 SW HWY 484  
DUNNELLO, FL 34432

**New Principal Place of Business:**

**Current Mailing Address:**

11251 SW HWY 484  
DUNNELLO, FL 34432

**New Mailing Address:**

FEI Number: 59-3062500      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GOSS, A J REV  
193 TENNESSEE AVENUE  
UMATILLA, FL 32784    US

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

BRENNAN, MARYANN D  
5175 SW 128TH STREET ROAD  
OCALA, FL 34473    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: MARYANN D. BRENNAN

01/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P            ( ) Delete  
Name: GOSS, A J  
Address: 193 TENNESSEE AVENUE  
City-St-Zip: UMATILLA, FL 32784

Title: V            ( ) Delete  
Name: BRENNAN, MARYANN  
Address: 5175 SW 128TH ST RD  
City-St-Zip: OCALA, FL 34473

Title: T            ( ) Delete  
Name: MURPHY, MARILYN D  
Address: 9720 SW 130TH AVE  
City-St-Zip: DUNNELLO, FL 34432

Title: S            ( ) Delete  
Name: STEWART, PATRICIA  
Address: 5920 SW 103RD LOOP  
City-St-Zip: OCALA, FL 344767735

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

Title: P            (X) Change ( ) Addition  
Name: BRENNAN, MARYANN D  
Address: 5175 SW 128TH STREET ROAD  
City-St-Zip: OCALA, FL 34473

Title: V            (X) Change ( ) Addition  
Name: SICKLE, JEROME A  
Address: 9915 SW 47TH AVENUE  
City-St-Zip: OCALA, FL 34476

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: MARYANN D. BRENNAN

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date