

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42204

FILED
Jan 23, 2009
Secretary of State

Entity Name: GETHSEMANE CHURCH OF CHRIST WRITTEN IN HEAVEN, INC.

Current Principal Place of Business:

4599 WINTERGREEN RD
GREENWOOD, FL 32442

New Principal Place of Business:

Current Mailing Address:

4599 WINTERGREEN RD
GREENWOOD, FL 32442

New Mailing Address:

FEI Number: 59-3045191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HORNE, HORACE J
3591 FLAT ROAD
GREENWOOD, FL 32443 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: D () Delete
Name: NIX, TERRY
Address: 1102 AGUTHA DRIVE
City-St-Zip: DOTHAN, AL

Title: D () Delete
Name: GROOMS, DARRYL
Address: 3568 FLAT RD
City-St-Zip: GREENWOOD, FL

Title: D () Delete
Name: HORNE, LIZZIE
Address: 3591 FLAT RD
City-St-Zip: GREENWOOD, FL 32442

Title: S () Delete
Name: HARDRICK, INEZ
Address: 159 BRYANT ST
City-St-Zip: COTTONWOOD, AL 36320

Title: T () Delete
Name: NIX, ANNIE PEARL
Address: 1102 AGUTHA DRIVE
City-St-Zip: DOTHAN, AL

Title: V () Delete
Name: HORNE, HORACE
Address: 3591 FLAT ROAD
City-St-Zip: GREENWOOD, FL 32443

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NIX, TERRY
Address: 1102 AGUTHA DRIVE
City-St-Zip: DOTHAN, AL 36301

Title: D (X) Change () Addition
Name: GROOMS, DARRYL
Address: 3568 FLAT RD
City-St-Zip: GREENWOOD, FL 32443

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: NIX, ANNIE PEARL
Address: 1102 AGUTHA DRIVE
City-St-Zip: DOTHAN, AL 36301

Title: V (X) Change () Addition
Name: HORNE, HORACE J PASTOR
Address: 3591 FLAT ROAD
City-St-Zip: GREENWOOD, FL 32443

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: HORACE J HORNE

PAST

01/23/2009

Electronic Signature of Signing Officer or Director

Date