

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42647

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: CORNERSTONE COMMUNITY CHURCH, INC.

## Current Principal Place of Business:

1503 A 6TH ST SE  
WINTER HAVEN, FL 33880 US

## New Principal Place of Business:

## Current Mailing Address:

1503 A 6TH ST SE  
WINTER HAVEN, FL 33880 US

## New Mailing Address:

FEI Number: 59-3051206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIEFFER, LAWRENCE W  
1206 KIMBERLE COURT  
AUBURNDALE, FL 33823 US

## Name and Address of New Registered Agent:

WHITE, DIANE M  
11 C STREET  
HAINES CITY, FL 33844 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: DIANE M. WHITE

04/27/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KIEFFER, LAWRENCE W  
Address: 1206 KIMBERLE COURT  
City-St-Zip: AUBURNDALE, FL 33823

Title: T ( ) Delete  
Name: WHITE, DIANE  
Address: 11 C STREET  
City-St-Zip: HAINES CITY, FL 33844

Title: VD ( ) Delete  
Name: ACKART, MARGARET  
Address: 650 NORTH LAKE HOWARD DR. APT 48  
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD ( ) Delete  
Name: HOOK, JAMES  
Address: 3502 MAJESTY LOOP  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Delete  
Name: BOCKOVER, STEPHANIE  
Address: 72 LAKE DAISY BLVD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: D (X) Delete  
Name: WHITE, MARK  
Address: 11 C STREET  
City-St-Zip: HAINES CITY, FL 33844

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HOOK, JAMES  
Address: 3502 MAJESTY LOOP  
City-St-Zip: WINTER HAVEN, FL 33880

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

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

Title: SD (X) Change ( ) Addition  
Name: WHITE, MARK R  
Address: 11 C STREET  
City-St-Zip: HAINES CITY, FL 33844

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 for the exemption stated in Section 119.07(3)(i), 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: DIANE M. WHITE

T

04/27/2005

Electronic Signature of Signing Officer or Director

Date