

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43436

FILED
Feb 04, 2009
Secretary of State

Entity Name: FT. DRUM COMMUNITY CHURCH, INC.

Current Principal Place of Business:

32415 ROUTE 441 NORTH
FT. DRUM COMMUNITY, FL 34972

New Principal Place of Business:

Current Mailing Address:

32415 ROUTE 441 NORTH
FT. DRUM COMMUNITY, FL 34972

New Mailing Address:

FEI Number: 59-2752744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, E. T.
1930 TYLER ST.
HOLLYWOOD, FL 33020 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: T (X) Delete
Name: TERRY, SANDRA
Address: 34145 NW 29TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: T () Delete
Name: WATSON, DWAN
Address: 655 NE 361ST CT
City-St-Zip: OKEECHOBEE, FL 34972

Title: T () Delete
Name: WELCH, JUDITH
Address: 2151 NW 399TH ST.
City-St-Zip: OKEECHOBEE, FL 34972

Title: T (X) Delete
Name: FORREST, TERRY
Address: 34145 NW 29TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: T () Delete
Name: HOGLO, JOHN
Address: 12150 NE 22ND AVE.
City-St-Zip: OKEECHOBEE, FL 34972

Title: TR () Delete
Name: FULFORD, CAROLINA
Address: 2201 S KENANSVILLE RD
City-St-Zip: KENANSVILLE, FL 34739

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:

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: CAROLINA FULFORD

TR

02/04/2009

Electronic Signature of Signing Officer or Director

Date