## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43626

FILED Feb 27, 2009 Secretary of State

Entity Name: CATALYST COMMUNITY CHURCH OF ORANGE & OSCEOLA COUNTIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 14500 LANDSTAR BLVD. ORLANDO, FL 32824 **Current Mailing Address: New Mailing Address:** 14500 LANDSTAR BLVD. ORLANDO, FL 32824 FEI Number: 59-2977779 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANERS, DOUGLAS A 611 ALTAMIRE CIR. #301 ALTAMONTE SPRINGS, FL 32701 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MANERS, DOUGLAS Name: Name: 611 ALTAMIRE CIR. #301 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: Title: () Delete Title: () Change () Addition WENDELL, WILLIAM Name: Name: Address: 2555 PALM AVE Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: () Change () Addition LAMRE, ASIRU Name: Name: 14331 WESTPUL LOOP Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition SPERAZZA, ANGELO Name: Name: 13013 PHILADELPHIA WOODS LANE Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: () Delete Title: () Change () Addition HUGGINS, TEEROMANI Name: Name: 1943 LAZY OAKS LOOP Address: Address: City-St-Zip: SAINT CLOUD, FL 34771 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: DOUGLAS MANERS PRES 02/27/2009