

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49673

FILED
Jan 23, 2007
Secretary of State

Entity Name: UNITED FAMILY WORSHIP CENTER, INC.

Current Principal Place of Business:

11351 80TH AVE NW
CHIEFLAND, FL 32644 US

New Principal Place of Business:

Current Mailing Address:

POB 464
CHIEFLAND, FL 32644 US

New Mailing Address:

FEI Number: 59-3044354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCHER, CHARLES GARRY REV
11351 80TH AVE NW
CHIEFLAND, FL 32644 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: P () Delete
Name: BOWDAIN, DEWAYNE H
Address: 29321 NW 32ND AVE
City-St-Zip: NEWBERRY, FL 32669

Title: VP () Delete
Name: HATCHER, CHARLES
Address: POB 464
City-St-Zip: CHIEFLAND, FL 32644

Title: S () Delete
Name: HOLDER, LINDA
Address: PO BOX 742
City-St-Zip: CHIEFLAND, FL 32644

Title: T () Delete
Name: HATCHER, KATHRYN E
Address: POB 464
City-St-Zip: CHIEFLAND, FL 32644

Title: D () Delete
Name: BOWDOIN, RITA K
Address: 29321 NW 32ND AVE
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWDOIN, DEWAYNE H
Address: 29321 NW 32ND AVE
City-St-Zip: NEWBERRY, FL 32669

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

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Name:
Address:
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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 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: KATHRYN E. HATCHER

T

01/23/2007

Electronic Signature of Signing Officer or Director

Date