

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49893

FILED
Apr 15, 2009
Secretary of State

Entity Name: PALATKA CHRISTIAN SERVICE CENTER, INC.

Current Principal Place of Business:

820 REID STREET
PALATKA, FL 32177 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2465
PALATKA, FL 321782465 US

New Mailing Address:

FEI Number: 59-3132718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORN, JIM
2405 FAIRWAY DRIVE
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

GETCHELL, GARY
100 HERJA ACRE LANE
PALATKA, FL 32177 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: GARY GETCHELL

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: GETCHELL, GARY
Address: 100 HERJA ACRE LANE
City-St-Zip: PALATKA, FL 32177

Title: DV () Delete
Name: TAYLOR, WESLEY
Address: 1202 KIRBY STREET
City-St-Zip: PALATKA, FL 32177

Title: TD () Delete
Name: STAPLES, HENRIETTA
Address: 485 W. RIVER ROAD
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: DORN, JIM
Address: 2405 FAIRWAY DR
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: GETCHELL, GARY CHAIRMA
Address: 100 HERJA ACRE LANE
City-St-Zip: PALATKA, FL 32177

Title: DV (X) Change () Addition
Name: JOHN, JACOBS VICE CH
Address: 104 LINDA LANE
City-St-Zip: PALATKA, FL 32177

Title: TD (X) Change () Addition
Name: STAPLES, HENRIETTA TREAS
Address: 485 W. RIVER ROAD
City-St-Zip: PALATKA, FL 32177

Title: SD (X) Change () Addition
Name: LEARY, CYNTHIA SEC
Address: 206 CRYSTAL COVE DRIVE
City-St-Zip: PALATKA, FL 32177

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: GARY GETCHELL

CD

04/15/2009

Electronic Signature of Signing Officer or Director

Date