

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N49893

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** PALATKA CHRISTIAN SERVICE CENTER, INC.

**Current Principal Place of Business:**

820 REID STREET  
SUITE 2  
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:**

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

**Name and Address of New Registered Agent:**

BLACKWELDER, SUZANNE  
119 GOBBLER ROAD  
INTERLACHEN, FL 32148 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: SUZANNE BLACKWELDER

03/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C  
Name: GETCHELL, GARY CHAIR  
Address: 100 HERJA ACRE LANE  
City-St-Zip: PALATKA, FL 32177

Title: DV  
Name: DAVIS-FLOWERS, MARSHA VICE CH  
Address: 208 OLD PENIEL ROAD  
City-St-Zip: PALATKA, FL 32177

Title: TD  
Name: MYERS, LINDA TREAS  
Address: 1419 REID STREET  
City-St-Zip: PALATKA, FL 32177

Title: SD  
Name: HARRELL, PHYLLIS R SEC  
Address: 271 EAST RIVER ROAD  
City-St-Zip: EAST PALATKA, FL 32131

I hereby 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 all other like empowered.

SIGNATURE: GARY GETCHELL

C

03/15/2011

Electronic Signature of Signing Officer or Director

Date