

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49943

FILED
Apr 15, 2007
Secretary of State

Entity Name: INTERDENOMINATIONAL WORSHIP CENTER, INC.

Current Principal Place of Business:

6470 W CR 476
BUSNELL, FL 33513 US

New Principal Place of Business:

Current Mailing Address:

6470 W CR 476
BUSHNELL, FL 33513 US

New Mailing Address:

FEI Number: 65-0351257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSHALL, DONALD C.
6470 W CR 476
BUSHNELL, FL 33513 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: DP () Delete
Name: MARSHALL, DONALD C.,
Address: 6470 W CR 476
City-St-Zip: BUSHNELL, FL 33513

Title: DT () Delete
Name: CASON, CHARLOTTE
Address: EDGEWATER AVE 14431
City-St-Zip: NOBLETON, FL 34661

Title: DS () Delete
Name: MARSHALL, VIRGINIA V.,
Address: 6470 W CR 476
City-St-Zip: BUSHNELL, FL 33513

Title: D () Delete
Name: PARSONS, MATTHEW
Address: 11203 SW 46TH TERRACE
City-St-Zip: WEBSTER, FL 33597

Title: D () Delete
Name: MARSHALL, BRIAN D
Address: PO BOX 1523
City-St-Zip: BUSHNELL, FL 33513

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:

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: DONALD C. MARSHALL

DP

04/15/2007

Electronic Signature of Signing Officer or Director

Date