

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # N51198

1. Entity Name
THE CHRISTIAN CHURCH AT DELEON SPRINGS, INC.



Principal Place of Business
**4481 MILLS RD
DELEON SPRINGS, FL 32130 US**

Mailing Address
**P.O. BOX 454
DELEON SPRINGS, FL 32130**



02042008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3147326	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BROOKS, ROBERT C.
4890 MERWIN ST.
DELEON SPRINGS, FL 32130**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BROOKS, ROBERT C.
STREET ADDRESS	4890 MERWIN ST.
CITY-ST-ZIP	DELEON SPGS., FL
TITLE	T
NAME	MARPOLE, THOMAS A
STREET ADDRESS	314 KATRINA ST
CITY-ST-ZIP	DELEON SPRINGS, FL
TITLE	D
NAME	SWANN, JAMES T.
STREET ADDRESS	528 CYGNET LANE
CITY-ST-ZIP	DELAND, FL
TITLE	T
NAME	HANSBROUGH, VICKIE
STREET ADDRESS	1169 9TH AVE.
CITY-ST-ZIP	DELAND, FL 32724
TITLE	T
NAME	UNDERWOOD, JIM
STREET ADDRESS	3797 WILLOW RD.
CITY-ST-ZIP	DELAND, FL 32720
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000870481
04/09/08-80089-023 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vickie Hansbrough Vickie Hansbrough 3/23/08 (386) 736-2019
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #