

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51198

FILED
Mar 24, 2009
Secretary of State

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

Current Principal Place of Business:

4481 MILLS RD
DELEON SPRINGS, FL 32130 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 454
DELEON SPRINGS, FL 32130

New Mailing Address:

FEI Number: 59-3147326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, ROBERT C.
4890 MERWIN ST.
DELEON SPRINGS, FL 32130 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: D () Delete
Name: BROOKS, ROBERT C.
Address: 4890 MERWIN ST.
City-St-Zip: DELEON SPGS., FL

Title: T () Delete
Name: MARPOLE, THOMAS A
Address: 314 KATRINA ST
City-St-Zip: DELEON SPRINGS, FL

Title: D () Delete
Name: SWANN, JAMES T.
Address: 526 CYGNET LANE
City-St-Zip: DELAND, FL

Title: T () Delete
Name: HANSBROUGH, VICKIE
Address: 1169 9TH AVE.
City-St-Zip: DELAND, FL 32724

Title: T () Delete
Name: UNDERWOOD, JIM
Address: 3797 WILLOW RD.
City-St-Zip: DELAND, FL 32720

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 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: VICKIE HANSBROUGH

T

03/24/2009

Electronic Signature of Signing Officer or Director

Date