## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000392

FILED May 14, 2009 Secretary of State

Entity Name: FIRST CHURCH OF GOD OF LABELLE INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 

**80 FLORIDA STREET** LABELLE, FL 33935 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 370 LABELLE, FL 33935

FEI Number: 59-6598960 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GORNOSKI, STEVE GORNOSKI, STEVE PO BOX 370 401 FIRST AVE

401 FIRST AVE LABELLE LABELLE, FL 33935 US

LABELLE, FL 33975 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: DARLENE HERNANDEZ 05/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition ( ) Delete

DEESE, NELLIE HERNANDEZ, DARLENE Name: Name: 445 WHIDDEN ROAD Address: PO BOX 2168 Address: City-St-Zip: LABELLE, FL 33935 City-St-Zip: LABELLE, FL 33975

Title: Title: ( ) Delete () Change () Addition

BARBER, DARLENE Name: Name: Address: 1625 CR 78 Address: City-St-Zip: LABELLE, FL 33935 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

HERNANDEZ, DARLENE Name: HERNANDEZ, DARLENE Name: 247 WHIDDEN ROAD Address: P.O. BOX 2168 Address: City-St-Zip: LABELLE, FL 33975 City-St-Zip: LABELLE, FL 33935

Title: () Delete Title: () Change () Addition

Name: KEITH, BARBER Name: Address: 1625 CR 78 Address: City-St-Zip: LABELLE, FL 33935 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

HERNANDEZ, RALPH HERNANDEZ, RALPH Name: Name: P.O. BOX 2168 247 WHIDDEN ROAD Address: Address: City-St-Zip: LABELLE, FL 33975 City-St-Zip: LABELLE, FL 33935

Title: () Delete Title: () Change () Addition

MCLEAN, KATHLEEN Name: Name: Address: 1110 CASTLETON TERR Address: LABELLE, FL 33935 City-St-Zip: 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: DARLENE HERNANDEZ SEC 05/14/2009