


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N93000000779	
1. Entity Name CHURCH OF CHRIST AT 1120 SOUTH THOMPSON AVENUE, DELAND, FLORIDA INCORPORATED	

Principal Place of Business 1120 S THOMPSON AVE DELAND, FL 32720	Mailing Address 1120 S. THOMPSON AVE. DELAND, FL 32720
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**FILED**  
**Jul 22, 2008 08:00 AM**  
**Secretary of State**



07122008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2483282	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JENKINS, CHARLIE J  
523 WEST HUBBARD AVENUE  
DELAND, FL 32720

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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  DATE 7-18-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD JENKINS, CHARLIE J 523 W HUBBARD AVENUE DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FRANKS, JEFFREY 1167 BALFOUR DRIVE DELTONA, FL 32725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SMITH, JOAN 814 W FRANKLIN ST. DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEROSE, MILDRED P.O. BOX 1602-1505 S ADELLE AVENUE DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTTS, MARVIS 1167 BALFOUR DRIVE DELTONA, FL 32725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/22/08-80011-008 70.00

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:  7-18-08 386-734-6159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #