

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001069

Entity Name: ELEMENT3 CHURCH, INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

3540 MAHAN DRIVE
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 14792
TALLAHASSEE, FL 323174792

New Mailing Address:

FEI Number: 59-3175184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THRASHER, ELWIN R JR
908 N. GADSDEN
TALLAHASSEE, FL 32303 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: PRES () Delete
Name: MCNEES, MARK
Address: 10514 BLUE WING COURT
City-St-Zip: TALLAHASSEE, FL 32312

Title: TR () Delete
Name: GREEN, LORI B
Address: 4321 ROCKINGHAM ROAD
City-St-Zip: TALLAHASSEE, FL 32303

Title: SEC () Delete
Name: HALLMAN, KERA
Address: 6051 PLOW TRAIL
City-St-Zip: TALLAHASSEE, FL 32317

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:

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: LORI GREEN

TREA

01/28/2009

Electronic Signature of Signing Officer or Director

Date