2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# N93000003048

Entity Name: THE COMMUNITY CHURCH OF SANTA ROSA BEACH, INC.

Current Principal Place of Business:

3524 U.S. HWY 98 N
SANTA ROSA BCH., FL 32459

New Principal Place of Business:

3524 U.S. HWY 98 W
SANTA ROSA BCH., FL 32459

Current Mailing Address:

POST OFFICE BOX 1723
SANTA ROSA BCH., FL 32459

New Mailing Address:

FEI Number: 59-1892441 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIS, NANCY J
377 RIDGE RD
SANTA ROSA BCH., FL 32459 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: DOF ( ) Delete
Name: DICKSON, CAROL
Address: 45 TRADEWINDS DR.
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: CHOB ( ) Delete
Name: LYSINGER, REX
Address: 3276 BURNT PINE CIRCLE
City-St-Zip: DESTIN, FL 32550

Title: DOA ( ) Delete
Name: BLUNT, ANN
Address: 1238 DEERWOOD DRIVE
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: DBG ( ) Delete
Name: BARONE, STEVE
Address: 3600 PRESERVE LANE
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: DOM ( ) Delete
Name: HALL, SUSAN
Address: 488 REGATA BAY BLVD
City-St-Zip: DESTIN, FL 32541

Title: DOCE ( ) Delete
Name: RICE, JEAN
Address: 1480 BAYTOWNE AVE. EAST
City-St-Zip: MIRAMAR BEACH, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHOB (X) Change ( ) Addition
Name: WITBECK, PATRICIA C
Address: 963 DRIFTWOOD POINT ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DOO (X) Change ( ) Addition
Name: LYSINGER, REX
Address: 3276 BURNT PINE CIRCLE
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DOF (X) Change ( ) Addition
Name: MUELLER, ROBERT
Address: 1355 E. NURSERY ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: PATRICIA C. WITBECK CHOB 04/10/2009

Electronic Signature of Signing Officer or Director Date