2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400002000

Entity Name: SEMINOLE COMMUNITY CHURCH, INC.

FILED Apr 29, 2008 Secretary of State

O 1. D	nin sin al Diss	of Business	Nov. Prince	singl Bloom of Business		
	nncipai Piac NGE AVE BL'	e of Business: /D	New Princ	cipal Place of Business:		
SANFORE	D, FL 32771					
Current Mailing Address:			New Maili	New Mailing Address:		
	NGE AVE BLY), FL 32771	/D US				
FEI Number:	: 59-3262692	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
5735 NOR						
SANFORE), FL 32771	US				
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,		
SIGNATU	RE:					
	Electro	nic Signature of Registered Age	ent	Date		
OFFICER	S AND DIREC	CTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTOR		
Title:	,) Delete	Title:	() Change () Addition		
Name: Address:	WALSH, GERA 23251 OAK PI		Name: Address:			
City-St-Zip:		FL 327768616	City-St-Zip:			
Title:	T ()	() Delete	Title:	() Change () Addition		
Name:	MCQUATTERS		Name:			
Address: City-St-Zip:	5735 NORTH I SANFORD, FL		Address: City-St-Zip:			
City-St-Zip.	SANI ORD, I L		Oity-St-Zip.			
Title:	,) Delete	Title:	T (X) Change () Addition		
Name:	BURKETT, RC		Name:	BURKETT, RONALD		
Address:		BEAUTY TERRACE	Address:	260 MEADOW BEAUTY TERRACE		
City-St-Zip:	SANFORD, FL	32//1	City-St-Zip:	SANFORD, FL 32771		
Title:	D () Delete	Title:	() Change () Addition		
Name:	DONALDSON,		Name:			
Address:	209 DOGWOO		Address:			
City-St-Zip:	SANFORD, FL	32//1	City-St-Zip:			
Title:	D () Delete	Title:	() Change () Addition		
Name:	MINER, PHILL		Name:			
Address:	790 SUMMER		Address:			
City-St-Zip:	SANFORD, FL	32771	City-St-Zip:			
Title:	CLER () Delete	Title:	() Change () Addition		
Name:	CUSIMANO, G		Name:	· · · · · · · · · · · · · · · · · · ·		
Address:	1001 GROVE	MANOR DR	Address:			
City-St-Zip:	SANFORD, FL	32771	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: GERALD R WALSH P 04/29/2008