

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003166

FILED
Apr 15, 2009
Secretary of State

Entity Name: CHRISTIAN COALITION OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business:

151 N YOUNG BLVD
CHIEFLAND, FL 32626

New Principal Place of Business:

Current Mailing Address:

10251 NE 92 PL
BRONSON, FL 32621 US

New Mailing Address:

FEI Number: 59-3251941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAUCHAMP, W O III
19 NE 3 STREET
CHIEFLAND, FL 32626 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: PD () Delete
Name: MELCHIOR, JUANITA S
Address: 10251 NE 92 PL
City-St-Zip: BRONSON, FL 32621

Title: VD () Delete
Name: WHISTLER, MIKE
Address: 7433 NW 147 PL
City-St-Zip: TRENTON, FL 32693

Title: TD () Delete
Name: STRANGE, MARIE
Address: 8951 NW 40 ST
City-St-Zip: CHIEFLAND, FL 32626

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: JUANITA S. MELCHIOR

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date