

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003577

FILED
Mar 11, 2009
Secretary of State

Entity Name: OCEANSIDE COMMUNITY CHURCH OF SATELLITE BEACH, FLORIDA, INCORPORATED

Current Principal Place of Business:

305 CASSIA BLVD.
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 372364
SATELLITE BEACH, FL 32937 US

New Mailing Address:

FEI Number: 59-1876276 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROWLAND, CHARLES R
2701 BARROW ROAD
MERRITT ISLAND, FL 32952 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: P () Delete
Name: ROWLAND, CHARLES R PASTOR
Address: 2701 BARROW DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: HARRELL, ALAN TRUSTEE
Address: 95 B DELAWARE ST.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: WESTBY, CLAIR FIN SEC
Address: 1246 SEMINOLE DR.
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: D () Delete
Name: CHASE, CHARLES CHAIR
Address: 6928-D SONNY DALE DR
City-St-Zip: MELBOURNE, FL 32904

Title: TD () Delete
Name: DUNCAN, LEONARD TREASUR
Address: 3972 SNOWY EGRET DR.
City-St-Zip: MELBOURNE, FL 32904

Title: D () Delete
Name: HURLEY, WOODROW DEACON
Address: 309 MARKLEY CT
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: HARRELL, ALAN TRUSTEE
Address: 540 SHERIDAN AVE.
City-St-Zip: SATELLITE BEACH, FL 32937

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

Title: D (X) Change () Addition
Name: CHASE, CHARLES CHAIR
Address: 131 THERESA DR.
City-St-Zip: MELBOURNE, FL 32934

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: CHARLES R. ROWLAND

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date