

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004791

FILED
Mar 31, 2008
Secretary of State

Entity Name: FIRST CHURCH OF THE GALILEAN, INC.

Current Principal Place of Business:

1130 ST. RD. 17 NORTH
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2002
SEBRING, FL 33871

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LARNARD, JIM
1528 CARIBBEAN RD.
SEBRING, FL 33872 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: D () Delete
Name: LARNARD, JIM
Address: 1546 SAINT THOMAS AVE.
City-St-Zip: SEBRING, FL 33872

Title: BMT () Delete
Name: HAWTHORNE, MARLENE
Address: 2880 EL DORADO AVE.
City-St-Zip: AVON PARK, FL 33825

Title: BMT () Delete
Name: CONLEY, JUDSON A
Address: 2023 GREENWAY DR
City-St-Zip: SEBRING, FL 33870

Title: BMT () Delete
Name: MORRIS, DAVID
Address: 1616 SE. LAKEVIEW DR.
City-St-Zip: SEBRING, FL 33870

Title: BMT () Delete
Name: BROCK, LARRY
Address: 2782 W BANDRA RD
City-St-Zip: AVON PARK, FL 33825

Title: T () Delete
Name: STITES, LEAH
Address: 3651 HWY. 27 S. LOT 172
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LARNARD, JIM
Address: 1528 CARIBBEAN RD.
City-St-Zip: SEBRING, FL 33872

Title: BMT (X) Change () Addition
Name: MORRIS, BETTY SEC.
Address: 1616 SE. LAKEVIEW DR.
City-St-Zip: SEBRING, FL 33870

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

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: JIM LARNARD

D

03/31/2008

Electronic Signature of Signing Officer or Director

Date