

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 22, 2009
Secretary of State**

DOCUMENT# N96000004543

Entity Name: PROGRESSIVE UNITED CHRISTIAN CENTER, INC.

Current Principal Place of Business:

11228 SW WILLISTON ROAD
MICANOPY, FL 32667

New Principal Place of Business:

Current Mailing Address:

11228 SW WILLISTON ROAD
MICANOPY, FL 32667

New Mailing Address:

FEI Number: 59-3262116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEWART, LIZZIE
11228 SW WILLISTON ROAD
MICANOPY, FL 32667 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: CDF () Delete
Name: SMITH, KEITH
Address: 11228 SW WILLISTON ROAD
City-St-Zip: MICANOPY, FL 32667

Title: CDT () Delete
Name: ALLEN, QUINCY
Address: 11228 SW WILLISTON ROAD
City-St-Zip: MICANOPY, FL 32667

Title: PFD () Delete
Name: STEWART, LIZZIE
Address: 11228 SW WILLISTON ROAD
City-St-Zip: MICANOPY, FL 32667

Title: DS () Delete
Name: HERRING, CARRIE
Address: 11228 SW WILLISTON ROAD
City-St-Zip: MICANOPY, FL 32667

Title: CR () Delete
Name: PATTERSON, YVONNE
Address: 11228 SW WILLISTON ROAD
City-St-Zip: MICANOPY, FL 32667

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:

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: LIZZIE STEWART

Electronic Signature of Signing Officer or Director

BISH

01/22/2009

_____ Date