

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006037

FILED
Sep 10, 2009
Secretary of State

Entity Name: UPPER ROOM OF GREATER GAINESVILLE CHURCH OF GOD IN CHRIST/UPPER ROOM MINISTRIES, INC.

Current Principal Place of Business:

1949 NORTHEAST 27TH AVENUE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 140027
GAINESVILLE, FL 32614

New Mailing Address:

FEI Number: 59-3734773 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SHELTON, PEARLIE L
6502 N.W. 30TH TERRACE
GAINESVILLE, FL 32653 US

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: ST () Delete
Name: BREWTON, MARSHA D
Address: 2911 N.E. 17TH DRIVE
City-St-Zip: GAINESVILLE, FL 32601

Title: CVT () Delete
Name: ANDERSON, RICHARD
Address: P.O. BOX 140352
City-St-Zip: GAINESVILLE, FL 32614

Title: PT () Delete
Name: SHELTON, PEARLIE
Address: 6502 N.W. 30TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: TRT () Delete
Name: FELLIS-LEE, DENISE
Address: P.O. BOX 668
City-St-Zip: HIGH SPRINGS, FL 32655

Title: VT () Delete
Name: MCARTHUR, SHELTON I
Address: 6502 N.W. 30TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653

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: RICHARD V. ANDERSON

CVT

09/10/2009

Electronic Signature of Signing Officer or Director

Date