

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006160

FILED
Jan 17, 2009
Secretary of State

Entity Name: PINE HILLS CHURCH OF CHRIST, INC.

Current Principal Place of Business:

890 N. HASTINGS ST.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

890 N. HASTINGS ST.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-3417514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOSE, JOHN E JR.
514 EAST COLONIAL DRIVE
ORLANDO, FL 32803 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: PT () Delete
Name: NICHOLSON, DAN
Address: 5301 BENNETT PLACE
City-St-Zip: ORLANDO, FL 32808

Title: TT () Delete
Name: BYRAM, BENSON E
Address: 2801 SOUTH BINON ROAD
City-St-Zip: APOPKA, FL 32703

Title: ST () Delete
Name: WEST, CECIL R
Address: 292 CALLIOPE STREET
City-St-Zip: OCOEE, FL 34761

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: CECIL R. WEST

ST

01/17/2009

Electronic Signature of Signing Officer or Director

Date