

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000515

FILED  
May 04, 2009  
Secretary of State

**Entity Name:** GREATER WORKS CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

2617 BETHUNE ROAD  
MIMS, FL 32754

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 707  
MIMS, FL 32754

**New Mailing Address:**

**FEI Number:** 59-3432447      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

TOOLEY, EARLEAN R  
2541 BETHUNE ROAD  
MIMS, FL 32754      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: T      ( ) Delete  
Name: TOOLEY, BRETT A  
Address: 2541 BETHUNU RD  
City-St-Zip: MIMS, FL 32754

Title: S      ( ) Delete  
Name: MCCLAM, BELINDA  
Address: 1615 CRAIG STREET  
City-St-Zip: TITUSVILLE, FL 32754

Title: D      ( ) Delete  
Name: CURRY, KAREN  
Address: 709 29TH CT E  
City-St-Zip: BRADENTON, FL 34208

Title: C      ( ) Delete  
Name: TOOLEY, EARLEAN R  
Address: 2541 BETHUNE ROAD  
City-St-Zip: MIMS, FL 32754

Title: D      ( ) Delete  
Name: MEANS, TRACEY M  
Address: P.O. BOX 641  
City-St-Zip: MIMS, FL 32754

**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: D      (X) Change ( ) Addition  
Name: BARTON, JUANITA  
Address: P. O. BOX 808  
City-St-Zip: MIMS, FL 32754

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: EARLEAN R. TOOLEY

C

05/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date