

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006348

FILED
Sep 05, 2009
Secretary of State

Entity Name: THE REDEEMED CHURCH OF GOD IN CHRIST OF HAINES CITY, FL., INC.

Current Principal Place of Business:

724 NORTH 8TH STREET
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3731
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 59-3409446 **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:

THOMAS, LARRY D
2208 EAST OAKLEY AVENUE
HAINES CITY, FL 33844 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: FOSTER, SAMMY
Address: 1207 TEMPLE CIRCLE
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: PITTS, WILLIE M
Address: 225 NORTH 23RD ST.
City-St-Zip: HAINES CITY, FL 33844

Title: DT () Delete
Name: CHAVIS, JOHNNIE
Address: 78 HOLIDAY MANOR
City-St-Zip: HAINES CITY, FL

Title: D () Delete
Name: COMMINGS, ELBERT
Address: 1210 AVE 1
City-St-Zip: HAINES CITY, FL

Title: D () Delete
Name: PITTS, MARVIN
Address: 225 NORTH 23RD. ST.
City-St-Zip: HAINES CITY, FL 33844

Title: DT () Delete
Name: RILEY, DAVID
Address: 807 REFLECTOIN LOOP EAST
City-St-Zip: WINTER HAVEN, FL 33884

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:

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: LARRY D. THOMAS

D

09/05/2009

Electronic Signature of Signing Officer or Director

Date