

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 05, 2008
Secretary of State**

DOCUMENT# N97000007067

Entity Name: ST. MARY'S COMMUNITY CHURCH, INC

Current Principal Place of Business:

902 E. RENFRO ST.
PLANT CITY, FL 335643415

New Principal Place of Business:

902 E. RENFRO ST.
PLANT CITY, FL 335633415

Current Mailing Address:

P. O. BOX 3415
PLANT CITY, FL 33564 US

New Mailing Address:

P. O. BOX 3415
PLANT CITY, FL 33563 US

FEI Number: 59-3415773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, MICHAEL G
2171 PINE RIDGE ROAD, STE. D
NAPLES, FL 34109 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: DP () Delete
Name: KNIGHTEN, SR T
Address: 2110 SYDNEY DOVER ROAD
City-St-Zip: DOVER, FL 33527

Title: DVP () Delete
Name: KNIGHTEN, SR E
Address: 620 CHARLOW COURT
City-St-Zip: PLANT CITY, FL 33563

Title: DS () Delete
Name: BROWN, STELLA M.
Address: 604 BETHUNE DR
City-St-Zip: PLANT CITY, FL 33563

Title: T () Delete
Name: KNIGHTEN, SR D
Address: 1813 BOND ST
City-St-Zip: PLANT CITY, FL 33563

Title: TM () Delete
Name: HARRELL, SANDRA
Address: 1304 LOUISIANA ST.
City-St-Zip: PLANT CITY, FL 33563

Title: TM () Delete
Name: KNIGHTEN, JR E
Address: 2718 LEWIS ROAD
City-St-Zip: DOVER, FL 33527

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
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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: TIMOTHY S KNIGHTEN SR

DP

02/05/2008

Electronic Signature of Signing Officer or Director

Date