

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000158

FILED
Aug 08, 2009
Secretary of State

Entity Name: SUNSHINE HOLINESS CHURCH/FELLOWSHIP MINISTRIES, INC.

Current Principal Place of Business:

1215 MARTIN LUTHER KING BLVD.
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

1743 MILLER ST
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-3673406 **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:

NEWMAN, JOHN
1743 MILLER ST
ORANGE PARK, FL 32073 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: DAT () Delete
Name: COTTON, ANTHONY
Address: 1216 MARTIN LUTHER KING BLVD.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: DS () Delete
Name: JOHNSON, ROSLAIND
Address: 1009 MARTIN LUTHER KING BLVD.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: JOHNSON, RUTH Y
Address: 637 PINE ST.
City-St-Zip: GREEN COVE SPRINGS, FL 32048

Title: T () Delete
Name: SIMEON, LISA
Address: 3607 DOUBLE BRANCH LANE
City-St-Zip: ORANGE PARK, FL 32073

Title: DT () Delete
Name: ROBINSON, TANA
Address: 1609 SPRUCE ST
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: BRISTER, CYNTHIA N
Address: 1743 MILLER ST.
City-St-Zip: ORANGE PARK, FL 32073

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: T (X) Change () Addition
Name: SIMEON, LISA
Address: 763 BURLWOOD CT.
City-St-Zip: ORANGE PARK, FL 32073

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: JOHN NEWMAN

RA

08/08/2009

Electronic Signature of Signing Officer or Director

Date