2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2008
Secretary of State

DOCUMENT# N98000001166

Entity Name: SPRING WARRIOR CHURCH OF CHRIST, INC.

Current Principal Place of Business:

7432 S. RED PADGETT ROAD
PERRY, FL 32347

New Principal Place of Business:

Current Mailing Address:

7432 S. RED PADGETT ROAD
PERRY, FL 32347

New Mailing Address:

FEI Number: 59-3525860 **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:

BLUE & BYERS,PLLC
115 WEST BAY ST
PERRY, FL 32347 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: BETHEA, NATHAN A
Address: 12177 RADCLIFF RD
City-St-Zip: PERRY, FL 32347

Title: D ( ) Delete
Name: BAKER, RANDY
Address: 808 SOUTHWOOD DRIVE
City-St-Zip: PERRY, FL 32348

Title: D ( ) Delete
Name: WILES, BILLY R
Address: 4450 BETHEA RD.
City-St-Zip: PERRY, FL 32347

Title: D ( ) Delete
Name: MIXON, ROBERT S
Address: 2363 MORGAN WHIDDON ROAD
City-St-Zip: PERRY, FL 32347

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:

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: SCOTT MIXON TRES 05/03/2008
Electronic Signature of Signing Officer or Director — Date