

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003217

FILED  
May 04, 2009  
Secretary of State

**Entity Name:** THE CHURCH UNITED FOR FAMILY VALUES, INC.

**Current Principal Place of Business:**

2415 STONE STREET  
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

1328 SOUTH BABCOCK STREET  
MELBOURNE, FL 32901 US

**Current Mailing Address:**

P.O. BOX 381  
MELBOURNE, FL 32902 US

**New Mailing Address:**

1328 SOUTH BABCOCK STREET  
MELBOURNE, FL 32901 US

**FEI Number:** 59-3488401 **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:**

BUGGS, HAZEL J  
805 E DAVIS ST  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

BUGGS, HAZEL J PRESIDE  
805 E DAVIS ST  
MELBOURNE, FL 32901 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: HAZEL J. BUGGS

05/04/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: BUGGS, HAZEL J REV.  
Address: 805 DAVIS ST  
City-St-Zip: MELBOURNE, FL 32901 US

Title: VPD ( ) Delete  
Name: BUGGS, JESSE E REV.  
Address: 805 EAST DAVIS ST  
City-St-Zip: MELBOURNE, FL 32901 US

Title: D ( ) Delete  
Name: SYPHER, KNOTASHA M  
Address: 1802 W. MARYLAND AVENUE  
City-St-Zip: PHOENIX, AZ 85015 US

Title: STD ( ) Delete  
Name: SYPHER, ASHAKI S  
Address: 10108 SOUTHWEST, 13TH STREET, APT. 108  
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: D ( ) Delete  
Name: BROOKS, MAGDALINE  
Address: 1609 MEADOW GLEN LANE  
City-St-Zip: MESQUITE, TX 75150 US

**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:

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: HAZEL J. BUGGS

PRES

05/04/2009

Electronic Signature of Signing Officer or Director

Date