

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 05, 2007
Secretary of State**

DOCUMENT# N98000006853

Entity Name: SOUTHEAST VOLUSIA COUNTY MINISTERIAL ASSOCIATION, INC.

Current Principal Place of Business:

EDGEWATER ALLIANCE CHURCH
310 N RIDGEWOOD AVE
EDGEWATER, FL 32132

New Principal Place of Business:

Current Mailing Address:

EDGEWATER ALLIANCE CHURCH
310 N RIDGEWOOD AVE
EDGEWATER, FL 32132

New Mailing Address:

FEI Number: 59-3587319 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:

Name and Address of New Registered Agent:

FOLDY, TIMOTHY
EDGEWATER ALLIANCE CHURCH
310 N RIDGEWOOD AVE
EDGEWATER, FL 32132 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: FOLDY, TIMOTHY
Address: 310 N RIDGEWOOD AVE
City-St-Zip: EDGEWATER, FL 32132

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Delete
Name: MARSH, JOHN
Address: 3232 SOUTH RIDGEWOOD AVENUE
City-St-Zip: EDGEWATER, FL 32141

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD () Delete
Name: BREMER, DON
Address: 310 DOUGLAS ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Delete
Name: ALLEN, WALTER
Address: 629 S. PINE ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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 FOLDY

TD

07/05/2007

Electronic Signature of Signing Officer or Director

_____ Date