

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004489

FILED
Apr 08, 2011
Secretary of State

Entity Name: ROSE OF SHARON WORSHIP CENTER, INC.

Current Principal Place of Business:

115 STATE RD. 50
GROVELAND, FL 34736

New Principal Place of Business:

Current Mailing Address:

112 STATE RD. 50
GROVELAND, FL 34736

New Mailing Address:

FEI Number: 59-3590117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FENDER, HARVEY C
112 STATE RD. 50
GROVELAND, FL 34736 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: PD
Name: FENDER, HARVEY C
Address: 112 STATE RD. 50
City-St-Zip: GROVELAND, FL 34736

Title: SD
Name: FENDER, JUNE E
Address: 112 STATE RD. 50
City-St-Zip: GROVELAND, FL 34736

Title: TD
Name: KIFER, ELIZABETH
Address: 16300 WYNNWOOD LN
City-St-Zip: GROVELAND, FL 34736

Title: D
Name: COFIELD, GLORIA Z
Address: 16148 WINWOOD LANE
City-St-Zip: GROVELAND, FL 34736

I hereby 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 all other like empowered.

SIGNATURE: JUNE FENDER

SD

04/08/2011

Electronic Signature of Signing Officer or Director

Date