

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716886

Entity Name: CAVERNS ROAD CHURCH OF CHRIST, INC.**Current Principal Place of Business:**CAVERNS & RIVER ROADS
4448 RIVER ROAD
MARIANNA, FL 32446**Current Mailing Address:**P.O. BOX 144
MARIANNA, FL 32446**FEI Number: 59-2428029****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOFF, GLENN
2633 CHOCTAW TRAIL
MARIANNA, FL 32446 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

Officer/Director Detail :

Title	P
Name	HALL, DONNE
Address	1041 CHURCH STREET
City-State-Zip:	MARIANNA FL 32446

Title	V
Name	PELHAM, JAMES
Address	2696 CHOCTAW TRAIL
City-State-Zip:	MARIANNA FL 32446

Title	S
Name	HALL, JUSTIN
Address	2371 LAWRENCE ROAD
City-State-Zip:	MARIANNA FL 32446

Title	D
Name	CARR, BENNIE
Address	P.O. BOX 87
City-State-Zip:	CYPRESS FL 32436

Title	D
Name	SWEET, ROLAND
Address	5787 DOZIER RD
City-State-Zip:	GREENWOOD FL 32443

Title	D
Name	REGISTER, DAVID
Address	4848 PIANO ROAD
City-State-Zip:	GRACEVILLE FL 32440

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: JUSTIN HALL**SECRETARY****03/17/2013**

Electronic Signature of Signing Officer/Director Detail

Date