

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003681

FILED
Feb 24, 2009
Secretary of State

Entity Name: CITY ON A HILL, INC.

Current Principal Place of Business:

2712 OLD MILLTOWN RD.
WILMINGTON, DE 198083728 US

New Principal Place of Business:

2712 OLD MILLTOWN RD.
WILMINGTON, DE 198083728 US

Current Mailing Address:

4085 HANCOCK BRIDGE PARKWAY
SUITE 111-269
NORTH FT. MYERS, FL 33903

New Mailing Address:

2712 OLD MILLTOWN RD.
WILMINGTON, DE 198083728 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEEBLES, BONNIE L
1123 SE 37TH STREET
CAPE CORAL, FL 339047195 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: PEEBLES, JOHN C
Address: 707 WATERS EDGE DR.
City-St-Zip: NEWARK, DE 19702 US

Title: D () Delete
Name: PEEBLES, BONNIE L D
Address: 707 WATERS EDGE DR.
City-St-Zip: NEWARK, DE 19702 US

Title: D () Delete
Name: PORTMAN, PAUL D
Address: 5142 LAKE TOSCANA DRIVE
City-St-Zip: WIMAUMA, FL 33598 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BEERS, ERNEST W
Address: 252 BENJAMIN BLVD
City-St-Zip: BEAR, DE 19701 US

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: JOHN C. PEEBLES

D

02/24/2009

Electronic Signature of Signing Officer or Director

_____ Date