

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002718

FILED
Apr 30, 2009
Secretary of State

Entity Name: OAKGROVE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

5470 HWY 164
MCDAVID, FL 32568

New Principal Place of Business:

Current Mailing Address:

3550 LAMBERT BRIDGE RD
MCDAVID, FL 32568 US

New Mailing Address:

FEI Number: 59-3382394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, TERRY A
3550 LAMBERT BRIDGE RD
MCDAVID, FL 32568 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: O'FARRELL, EVERETTE D
Address: 3841 HWY 164
City-St-Zip: MCDAVID, FL

Title: D () Delete
Name: BERRY, TRAVIS
Address: 5511 PINE FOREST ROAD
City-St-Zip: WALNUT HILL, FL

Title: D () Delete
Name: SANDERS, MARVIN
Address: 4465 RIGBY ROAD
City-St-Zip: CENTURY, FL 32535

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:

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: EVERETTE D O'FARRELL

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date