

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 17, 2009
Secretary of State**

DOCUMENT# N96000000602

Entity Name: FAITH CHRISTIAN CHURCH OF MANATEE COUNTY, INC.

Current Principal Place of Business:

5215 LORRAINE ROAD
BRADENTON, FL 34211 US

New Principal Place of Business:

Current Mailing Address:

5215 LORRAINE ROAD
BRADENTON, FL 34211 US

New Mailing Address:

FEI Number: 65-0634874 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, SCOTT
5215 LORRAINE RD.
BRADENTON, FL 34211 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: REPENNING, JEFF
Address: 5215 LORRAINE ROAD
City-St-Zip: BRADENTON, FL 34211

Title: D () Delete
Name: JAMESON, SAM
Address: 5215 LORRAINE ROAD
City-St-Zip: BRADENTON, FL 34211

Title: D (X) Delete
Name: PALMER, PAUL
Address: 5215 LORRAINE ROAD
City-St-Zip: BRADENTON, FL 34211

Title: D (X) Delete
Name: BERRY, TOM
Address: 5215 LORRAINE ROAD
City-St-Zip: BRADENTON, FL 34211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PALMER, PAUL
Address: 5215 LORRAINE ROAD
City-St-Zip: BRADENTON, FL 34211

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: SCOTT CLARK

D

02/17/2009

Electronic Signature of Signing Officer or Director

_____ Date