## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # 706512**

FIRST CHRISTIAN CHURCH OF MERRITT ISLAND, FLORIDA, INC.



**FILED** Jan 27, 2005 08:00 AN Secretary of State

Principal Place of Business

SIGNATURE:

1750 NORTH COURTENAY PARKWAY POST OFFICE BOX 541067 MERRITT ISLAND, FL 32954

Mailing Address

1750 NORTH COURTENAY PARKWAY POST OFFICE BOX 541067 MERRITT ISLAND, FL 32954



01112005 No Chg-NP

CR2E037 (10/03)

Applied For 4. FEI Number 59-1171942 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

## DO NOT WRITE IN THIS SPACE

DIAZ, JAVIER

5. Name and Address of Current Registered Agent

1750 NORTH COURTENAY PARKWAY MERRITT ISLAND, FL 32954

## DO NOT WRITE IN THIS SPACE

<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>					
SIGNATURE Signature, typed or printed name of registered agent and title diapolicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Financ     Trust Fund Contribution.	eing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS			. 44	L
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT DIAZ, JAVIER 1425 VICTORIA DR ROCKLEDGE, FL 32955			₹ .	U00000200004 01/28/05-80009-011 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT ORR, DEAN % 1750 N, COURTENAY PKWY MERRITT ISLAND, FL 32953			· •	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT THEORET, DENNIS C/O 1750 N. COURTENAY PKWY. MERRITT ISLAND, FL 32953			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FULLER, GLENN 335 BELAIR AVE MERRITT ISLAND, FL 32953			"IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CLARK, KURT % 1750 N. COURTENAY PKWY MERRITT ISLAND, FL 32953			6 A	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				••	•
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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/impowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					