



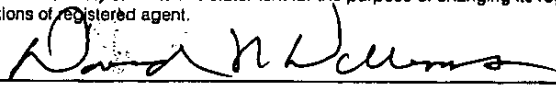
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RD Yantiss & Associates

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90316 049 ****61.25

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 707391 1. Entity Name CHURCH OF ONTOLOGY, INC.																																									
Principal Place of Business 1595 FRUIT COVE WOODS DR JACKSONVILLE, FL 32259				Mailing Address 1595 FRUIT COVE WOODS DR JACKSONVILLE, FL 32259																																					
2. Principal Place of Business Church of Ontology Suite, Apt. #, etc. 408 Ken Cove Rd. City & State Hot Springs NC Zip 28743 Country US		3. Mailing Address Agents & Corp. Inc. Suite, Apt. #, etc. Suite E 77E, 4th Ave. N. City & State Naples FL Zip 34102 Country US		50043051 																																					
4. FEI Number 59-1082450				Applied For <input type="checkbox"/> Not Applicable																																					
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required																																					
6. Name and Address of Current Registered Agent AGENTS AND CORPORATIONS, INC. SUITE E, 77E 4TH AVE. NORTH NAPLES, FL 34102			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																						
8. 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. SIGNATURE  DATE 4/19/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																									
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																					
Make check payable to Florida Department of State																																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">P ROACH, DIANE 408 KEN COVE ROAD HOT SPRINGS, NC 28743</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td>VD GATES, MERLYN 1595 FRUIT COVE WOODS DR JACKSONVILLE, FL 32259</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td>SD YANTISS, MARY 408 KEN COVE RD HOT SPRINGS, NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td>TD PURDY, CHRISTINE 408 KEN COVE ROAD HOT SPRINGS, NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td>D YANTISS, ROBERT 408 KEN COVE ROAD HOT SPRINGS, NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">P Yantiss, Robert 408 Ken Cove Rd. Hot Springs NC 28743</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>TD Yantiss, Mary 408 Ken Cove Rd. Hot Springs NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>SD McNeil, Darrell 408 Ken Cove Rd. Hot Springs NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>D Purdy, Christine 408 Ken Cove Rd. Hot Springs NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>D Patricia Smith 408 Ken Cove Rd. Hot Springs NC 28743</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table> </div> </div>						TITLE	P ROACH, DIANE 408 KEN COVE ROAD HOT SPRINGS, NC 28743	<input checked="" type="checkbox"/> Delete	TITLE	VD GATES, MERLYN 1595 FRUIT COVE WOODS DR JACKSONVILLE, FL 32259	<input type="checkbox"/> Delete	TITLE	SD YANTISS, MARY 408 KEN COVE RD HOT SPRINGS, NC 28743	<input type="checkbox"/> Delete	TITLE	TD PURDY, CHRISTINE 408 KEN COVE ROAD HOT SPRINGS, NC 28743	<input type="checkbox"/> Delete	TITLE	D YANTISS, ROBERT 408 KEN COVE ROAD HOT SPRINGS, NC 28743	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE	P Yantiss, Robert 408 Ken Cove Rd. Hot Springs NC 28743	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	TD Yantiss, Mary 408 Ken Cove Rd. Hot Springs NC 28743	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	SD McNeil, Darrell 408 Ken Cove Rd. Hot Springs NC 28743	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE	D Purdy, Christine 408 Ken Cove Rd. Hot Springs NC 28743	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	D Patricia Smith 408 Ken Cove Rd. Hot Springs NC 28743	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empowered 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.																																									
SIGNATURE: Mary W. Yantiss (Mary W. Yantiss, Treas.) 4-18-05 622-7503 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																									