


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 711158
 1. Entity Name
SOUTH SIDE CHRISTIAN CHURCH OF FORT MYERS, FLORIDA, INC.



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| Principal Place of Business 7800 COLLEGE PKWY FORT MYERS, FL 33907 | Mailing Address 7800 COLLEGE PKWY FORT MYERS, FL 33907 |
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02142006 No Chg-NP CR2E037 (11/05)

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|---|--------------------------------|
| 4. FEI Number 59-2131651 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
MASSENGALE, ROBERT
1550 WOODWIND COURT
FORT MYERS, FL 33919

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

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|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TE FULLER, JAMES 1420 MANUELS DR FORT MYERS, FL 33901 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TE PROULZ, ANDRE 15620 CRYSTAL LAKE DRIVE #104 NORTH FORT MYERS, FL 33917 |
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 11/3/117/06-80025-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Robert L. Massengale **ROBERT L. MASSENGALE** 2/15/06 239-277-0554

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #