

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90266 016 ****70.00

DOCUMENT # 733764

1. Entity Name

PORT ST. LUCIE CHRISTIAN CHURCH, INC.



Principal Place of Business

1420 SE FLORESTA DR
PORT ST. LUCIE FL 34983

Mailing Address

1420 SE FLORESTA DR
PORT ST. LUCIE FL 34983



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

05-0023600

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCPEEK, JAMES W
549 SE THORNHILL DRIVE
PORT ST. LUCIE FL 34983

7. Name and Address of New Registered Agent

Name
ROBERT H. BLAIR
Street Address (P.O. Box Number is Not Acceptable)
107 SW Ridgecrest Dr.

City **Port St. Lucie**

FL

Zip Code
34983

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

Robert H. Blair - ROBERT H. BLAIR - ELDER / TRUSTEE

3/17/06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when rechartering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
BLAIR, BOB
107 SE RIDGECREST DRIVE
PORT SAINT LUCIE FL 34953 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
BILLS, MIKE
1612 MISTLETOE ST
PORT SAINT LUCIE FL 34983 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
MCPEEK, JAMES W
540 SE THORNHILL DRIVE
PORT SAINT LUCIE FL 34983 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
SAMIOTIS, JOHN
2649 SOLAPA LANE
PORT ST. LUCIE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 H. Blair - ROBERT H. BLAIR - ELDER / TRUSTEE 3/17/06 772-878-8445