

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 12, 2006  
Secretary of State**

DOCUMENT# 763408

Entity Name: CHRIST CHURCH ON COVE ROAD, INC.

**Current Principal Place of Business:**

4175 SE COVE RD  
PO BOX 867  
PT SALERNO, FL 349920867

**New Principal Place of Business:**

**Current Mailing Address:**

4175 SE COVE RD  
PO BOX 867  
PT SALERNO, FL 349920867

**New Mailing Address:**

FEI Number: 59-2189897      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

METZ, FRANZ  
5751 SE 138TH STREET  
HOBE SOUND, FL 33455      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: PD      ( ) Delete  
Name: METZ, FRANZ,  
Address: 5751 SE 138TH STREET  
City-St-Zip: HOBE SOUND, FL

Title: VD      ( ) Delete  
Name: BAJIS, MIKE,  
Address: 8061 SHILOH TERRACE  
City-St-Zip: HOBE SOUND, FL

Title: TD      ( ) Delete  
Name: BALL, JOSEPH,  
Address: 12851 SE CIRCLR DRIVE  
City-St-Zip: HOBE SOUND, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: FRANZ METZ

PD

04/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date