

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90226 026 ****61.25

DOCUMENT # N02000001578

1. Entity Name

THE CHURCH WITHOUT WALLS OF INVERNESS,
FLORIDA, INC.



Principal Place of Business

4325 S. LITTLE AL POINT
INVERNESS FL 34452

Mailing Address

4325 S. LITTLE AL POINT
INVERNESS FL 34452

2. Principal Place of Business

1140 TURNER CAMP RD.

3. Mailing Address

1140 TURNER CAMP RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

INVERNESS

City & State
INVERNESS FLA.

City & State
FLA.

Zip
34453

Country
Citrus

Zip
34453

Country
Citrus



1st MOORE

CR2E037 (10/04)

4. FEI Number

30-0098311

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALEXANDER, DOUGLAS SR.
4325 S. LITTLE AL POINT
INVERNESS FL 34452

7. Name and Address of New Registered Agent

Name

Alexander Douglas SR.

Street Address (P.O. Box Number is Not Acceptable)

1140 TURNER CAMP RD.

INVERNESS

FL

City

FL

Zip Code

34453

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

DD Alexander Pastor Douglas Alexander

FEB 10, 2005

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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 T
NAME ALEXANDER, DOUGLAS SR
STREET ADDRESS 786 N HAMBELTONIAN DR
CITY-ST-ZIP INVERNESS FL 34453 ☐ Delete

TITLE T
NAME HOLLIS, JEFF
STREET ADDRESS 6165 E KING STREET
CITY-ST-ZIP INVERNESS FL 34452 ☐ Delete

TITLE T
NAME TROWBRIDGE, TAMMY
STREET ADDRESS 4301 S PLEASANT GROVE RD
CITY-ST-ZIP INVERNESS FL 34452 ☐ Delete

TITLE T
NAME SIMMONS, LYNDIA
STREET ADDRESS 2696 N RAILROAD WAY
CITY-ST-ZIP HERNANDO FL 34442 ☐ Delete

TITLE T
NAME WHITE, WILLIE T
STREET ADDRESS 5800 E ARBOR STREET
CITY-ST-ZIP INVERNESS FL 34452 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T
NAME ALEXANDER, TERESA
STREET ADDRESS 786 N. HAMBELTONIAN DR.
CITY-ST-ZIP INVERNESS, FL 34453 ☐ Change ☒ Addition

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

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

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

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

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

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:

DD Alexander Pastor Douglas Alexander

DATE

Daytime Phone #

FEB 10, 2005 (352) 344-2425