

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008244

FILED  
Mar 23, 2005  
Secretary of State

Entity Name: THE BODY OF CHRIST INTERNATIONAL INC.

**Current Principal Place of Business:**

734 EDGEWILD CT  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

734 EDGEWILD CT  
ORANGE CITY, FL 32763

**New Mailing Address:**

FEI Number: 02-0702070

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REA, MIKE  
734 EDGEWILD CT  
ORANGE CITY, FL 32763 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: D ( ) Delete  
Name: DODD, BRIAN  
Address: 1604 LITTLE SPARROW CT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: REA, MIKE  
Address: 734 EDGEWILD CT  
City-St-Zip: ORNAGE CITY, FL 32763

Title: D ( ) Delete  
Name: GIRGENTI, ROBIN  
Address: 1690 GLADIOLAS DR  
City-St-Zip: WINTER PK, FL 32792

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: D (X) Change ( ) Addition  
Name: REA, KIMBERLY  
Address: 734 EDGEWILD CT  
City-St-Zip: ORANGE CITY, FL 32763

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GIRGENTI, ROBIN  
Address: 3509 SEAFORD LANE  
City-St-Zip: CASSELBERRY, FL 32707

Title: D ( ) Change (X) Addition  
Name: GIRGENTI, RUSS  
Address: 3509 SEAFORD LANE  
City-St-Zip: CASSELBERRY, FL 32707

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MIKE REA

D

03/23/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date