2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07044

FILED Jan 06, 2006 Secretary of State

Entity Name: COMMUNITY CONGREGATIONAL UNITED CHURCH OF CHRIST, INC.

Current Principal Place of Business: New Principal Place of Business:

15300 N TAMIAMI TRAIL NAPLES, FL 34110

Current Mailing Address: New Mailing Address:

15300 N TAMIAMI TRAIL NAPLES, FL 34110

FEI Number: 59-2520944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PORTER, WRIGHT, MORRIS & ARTHUR W. JEFFREY CECIL 5801 PELICAN BAY BLVD SUITE 300 NAPLES, FL 34108 US

BONITA SPRINGS, FL 34135

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:

City-St-Zip:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete LYSIAK, JULIETTE MRS LYSIAK, JULIETTE MRS Name: Name: 10691 REGENT CIR Address: 10100 N. SILVER PALM DR. Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: ESTERO, FL 33928

Title: D/AT () Delete Title: (X) Change () Addition FUTHEY, DOREEN Name: SIMX, JAMES R MR. Name: Address: 396 HARVARD CT Address: 15300 TAMIAMI TR. N

City-St-Zip: NAPLES, FL 341048403 City-St-Zip: NAPLES, FL 34110

Title: DP () Delete Title: (X) Change () Addition

WEBB, DAVID M VANDER WILT, ROBERT Name: Name: 5220 TAMARIND RIDGE DRIVE 9824 SPRING RUN BLVD Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: BONITA SPRINGS, FL 34135

Title: DVAT () Delete Title: DVAT (X) Change () Addition

Name: OLDLAND, JEANNETTE Name: HAGELBARGER, RALPH 1033 SILVERSTRAND DR. Address: 24680 PARADISE ROAD Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: NAPLES, FL 34110

D/S Title: D/S () Delete Title: (X) Change () Addition

KIRKER, CHARLES IOVINE, EILEEN Name: Name: 148 ESTELLE DRIVE 22240 FOUNTAIN LAKES BLVD #102 Address: Address:

City-St-Zip: NAPLES, FL 34112 City-St-Zip: ESTERO, FL 33928

Title: (X) Delete Title: () Change () Addition SHROYER, HOMER Name: Name: Address: 27866 CARL CIRCLE Address:

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.

City-St-Zip:

SIGNATURE: JULIETTE LYSIAK A/S 01/06/2006