

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2006
Secretary of State**

DOCUMENT# N12046

Entity Name: THE UNITED CHRISTIAN CHURCH OF CHRIST, INCORPORATION OF COCONUT GROVE, FLORIDA

Current Principal Place of Business:

3288 CHARLES AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

PO BOX 330982
MIAMI, FL 33133

New Mailing Address:

PO BOX 330982
MIAMI, FL 33233

FEI Number: 65-0038553 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DUPREE, MARTHENIA D DR
4848 NW 24 CT
109
LAUDERDALE LAKES, FL 33313 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: VD () Delete
Name: DINGLE, IRVIN
Address: 3076 ELIZABETH ST.
City-St-Zip: MIAMI, FL 33133

Title: PD () Delete
Name: DUPREE, MARTHENIA
Address: 4848 NW 24 CT, # 109
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: S () Delete
Name: GAVINS, ROSIE
Address: 3611 OAK AVE.
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: DINGLE, DAVID
Address: 3370 WILLIAMS AVE
City-St-Zip: MIAMI, FL 33133

Title: T () Delete
Name: DINGLE, ARLENA
Address: 3076 ELIZABETH STREET
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: YOUNG, SONJA TUCKER
Address: 1370 NW 116 ST
City-St-Zip: MIAMI, FL 33167

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:

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

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

Title: D (X) Change () Addition
Name: TAYLOR-DINGLE, MARION
Address: 11601 LOUIS STREET
City-St-Zip: MIAMI, FL 33176

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: MARTHENIA DUPREE

PD

04/30/2006

Electronic Signature of Signing Officer or Director

_____ Date