


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N22986</b> 1. Entity Name <b>FIRST CHRISTIAN CHURCH AT LEESBURG, FLORIDA, INC.</b>	
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Principal Place of Business <b>FIRST CHRISTIAN CHURCH 1701 VINE STREET LEESBURG, FL 34748 US</b>	Mailing Address <b>ADMINISTRATION 1701 VINE STREET LEESBURG, FL 34748</b>
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**DO NOT WRITE IN THIS SPACE**



04142005 No Chg-NP CR2E037 (10/03)

4. FEI Number <b>59-1877036</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**GALL, DAVID  
04153 PICCIOLA RD  
FRUITLAND PARK, FL 34731**

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>Filing Fee is \$61.25 Due by May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SNYDER, AL 26017 NEWCOMBE CIRCLE LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT MACHACEK, KENNETH W 2000 BEVERLY PT ROAD LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEATER, ROBERT 26630 RACQUET CIRCLE LEESBURG, FL 34748
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04/20/05-80038-014 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**  **KENNETH W. MACHACEK** 4/18/05 365-9700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #