

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005772

FILED
Apr 26, 2006
Secretary of State

Entity Name: SOUTH PALM COMMUNITY CHURCH, INC.

Current Principal Place of Business:

6266 S. CONGRESS AVE
L16
LANTANA, FL 33462 US

New Principal Place of Business:

Current Mailing Address:

6266 S. CONGRESS AVE
L16
LANTANA, FL 33462 US

New Mailing Address:

FEI Number: 65-0493812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, STAN
6266 S. CONGRESS AVE. #16
LANTANA, FL 33462 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: DP () Delete
Name: COLEMAN, STAN
Address: 195 WESTWOOD CIRCLE E
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: FINLEY, WILLIAM
Address: 5040 BRIAN BLVD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: HUGHES, LARRY
Address: 5581 DESCARTES CIR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: CAPRIO, TOM
Address: 7932 RIDGEWOOD DRIVE
City-St-Zip: LAKE WORTH, FL 33467

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:

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: STAN COLEMAN

DP

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date