
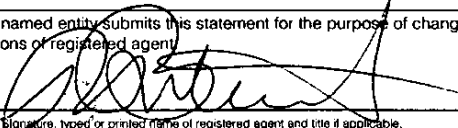
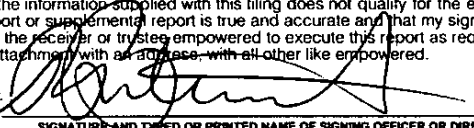


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 14, 2007 8:00 am**  
**Secretary of State**

03-14-2007 90024 001 \*\*\*\*61.25

<b>DOCUMENT # N96000004187</b>					
1. Entity Name ISLAND COMMUNITY CHURCH OF MERRITT ISLAND, INC.					
Principal Place of Business 1000 N. BANANA RIVER DR. MERRITT ISLAND, FL 32952			Mailing Address 1000 N. BANANA RIVER DR. MERRITT ISLAND, FL 32952		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		01162007 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
4. FEI Number 59-3402889		Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
VANHOOSE, JAMES R 1712 STDJORGE CT COCOA BCH, FL 32931-2378			Name <u>Ralph Bustamante</u> Street Address (P.O. Box Number is Not Acceptable) <u>4145 CROOKED mile ROAD</u> City <u>MERRITT Island</u> FL Zip Code <u>32952</u>		
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 		Ralph Bustamante, PRESIDENT 3/11/07		DATE	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DV	<input type="checkbox"/> Delete	TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUSTAMANTE, RALPH		NAME	Ralph Bustamante	
STREET ADDRESS	2105 S TROPICAL TRAIL		STREET ADDRESS	4145 CROOKED mile Rd	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952		CITY-ST-ZIP	MERRITT Island, FL 32952	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	VICE-PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATE, LAMONT		NAME	Peter DEEKS, SR.	
STREET ADDRESS	1545 CARMAN		STREET ADDRESS	4155 CROOKED mile Rd	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952		CITY-ST-ZIP	MERRITT Island, FL 32952	
TITLE	DT	<input type="checkbox"/> Delete	TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAGAN, TOM		NAME	TOM RAGAN	
STREET ADDRESS	630 BARRETT DRIVE		STREET ADDRESS	630 BARRETT DRIVE	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952		CITY-ST-ZIP	MERRITT Island, FL 32952	
TITLE	DP	<input checked="" type="checkbox"/> Delete	TITLE	TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VANHOOSE, JAMES R		NAME	Donna Edwards	
STREET ADDRESS	1712 ST DJORGE CT		STREET ADDRESS	1940 SHELTER TRAIL	
CITY-ST-ZIP	COCOA BCH, FL 329312378		CITY-ST-ZIP	MERRITT Island, FL 32952	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		PRESIDENT 3/11/07		321-453-0081	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	