

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741235

Entity Name: COMMUNITY CONGREGATIONAL CHRISTIAN CHURCH, INC.**Current Principal Place of Business:**9220 N CITRUS SPRINGS BLVD.
CITRUS SPRINGS, FL 34433**Current Mailing Address:**3851 N ROSE BAY PATH
BEVERLY HILLS, FL 34465 US**FEI Number: 59-1795637****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEFEVRE, SHIRLEY M
3851 N ROSE BAY PATH
BEVERLY HILLS, FL 34465 US*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

Officer/Director Detail :

Title	D
Name	UNSWORTH, DAVID
Address	19634 SW 88TH LOOP
City-State-Zip:	DUNNELLON FL 34432

Title	DEACON
Name	THOMAS, FRAN
Address	477 W. KELLER ST.
City-State-Zip:	HERNANDO FL 34442

Title	DEACON
Name	DONELAN, JAYNE
Address	10943 N. AIRWAY LOOP
City-State-Zip:	CITRUS SPRINGS FL 34434

Title	DEACON
Name	BANTA, NANCY
Address	7214 N. HEATHER DR.
City-State-Zip:	CITRUS SPRINGS FL 34434

Title	TREASURER
Name	LEFEVRE, SHIRLEY M
Address	3851 N ROSE BAY PATH
City-State-Zip:	BEVERLY HILLS FL 34465

Title	DEACON
Name	ZWAGA, GERALD
Address	19222 SW 101ST ST.
City-State-Zip:	DUNNELLON FL 34432

Title	DEACON
Name	HOMADUE, NANCY II
Address	176 E ANGELFISH CT.
City-State-Zip:	BEVERLY HILLS FL 34465

I hereby 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 all other like empowered.

SIGNATURE: SHIRLEY LEFEVRE**TREAS.****02/03/2015**

Electronic Signature of Signing Officer/Director Detail

Date