

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705616

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** FIRST CHRISTIAN CHURCH OF WEST PALM BEACH, INCORPORATED

**Current Principal Place of Business:**

215 SOUTH CONGRESS AVE  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 SOUTH CONGRESS AVE  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:** 59-6187790

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JAMES, CYNTHIA M  
430 NORTH J ST  
APT 1A  
LAKE WORTH, FL 33460 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:** P  
**Name:** HANSEN, CANDICE  
**Address:** 215 S. CONGRESS AVE  
**City-St-Zip:** WEST PALM BEACH, FL 33409

**Title:** T  
**Name:** HAMBRIGHT, BILL C  
**Address:** 6312 SEVEN SPRINGS BLVD, APT B  
**City-St-Zip:** GREENACRES CITY, FL 33463

**Title:** TR  
**Name:** JAMES, CYNTHIA  
**Address:** 430 NORTH J STREET APT 1A  
**City-St-Zip:** LAKE WORTH, FL 33460

**Title:** FS  
**Name:** HAMBRIGHT, GLORIA  
**Address:** 6312 SEVEN SPRINGS BLVD APT B  
**City-St-Zip:** GREENACRES, FL 33463

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:** CYNTHIA JAMES

RA

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date