


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 14, 2005 8:00 am**  
**Secretary of State**

03-14-2005 90082 047 \*\*\*\*61.25

<b>DOCUMENT # 707168-</b>					
1. Entity Name <b>FIRST CHRISTIAN CHURCH (DISCIPLES OF CHRIST) OF MELBOURNE, INC.</b>					
Principal Place of Business <b>2010 S. BABCOCK ST. MELBOURNE FL 32901</b>			Mailing Address <b>2010 S. BABCOCK ST. MELBOURNE FL 32901</b>		
2. Principal Place of Business  Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-6135903</b>	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>SUTER, DALE 136 SIGNATURE DRIVE MELBOURNE BEACH FL 32951</b>			7. Name and Address of New Registered Agent  Name: <b>William Gulladeo</b> Street Address (P.O. Box Number is Not Acceptable): <b>1676 Hudson Circle N.</b> City: <b>Melbourne</b> FL Zip Code: <b>32935</b>		
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: <u>William M. Gulladeo</u> DATE: <u>31 Jan. 2005</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW. FEE IS \$61.25 Due By May 1, 2005		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 NAME STREET ADDRESS CITY-ST-ZIP	D SUTER, DALE 136 SIGNATURE DRIVE MELBOURNE BEACH FL 32951 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman of the Board <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition William Gulladeo 1676 Hudson Circle N. Melbourne, FL 32935	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GLASS, ROBERT 678 CARIBBEAN ROAD SATELLITE BEACH FL 32937 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HANSEN, RUTH 361 MAPLE DRIVE SATELLITE BEACH FL 32937 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary of the Corp. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Brenda Reynolds 685 John Hancock Lane Melbourne, FL 32904	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KENDALL, ROGER 1050 OAK TREE PLACE MALABAR FL 32950 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Financial Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Paul Jennings 2022 Biscaya Ave. Melbourne FL 32935	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>* Bob R. Glass, Treasurer (R.C.G.L.A.S.S.)</u>			02-02-05 721-03-6031		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		