2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Jul 10, 2006 8:00 am **Secretary of State DOCUMENT #707740** 07-10-2006 90030 034 ****61.25 FIRST CHRISTIAN CHURCH OF VENICE, INC. Principal Place of Business Mailing Address 1100 CENTER RD 1100 CENTER RD VENICE, FL 34292 VENICE, FL 34292 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06062006 Chg-NP CR2E037 (4/06) City & State 4. FEI Number 59-6139017 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MILLER, WILLIAM D **4863 ORANGE TREE PLACE** Street Address (P.O. Box Number is Not Acceptable) VENICE, FL 34293 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to П Due by September 6, 2006 Trust Fund Contribution. Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. TITLE Delete TITLE Change MORGAN, DONALD 3759 BISCAYNE DRIVE N NORTH PORT, FL 34286 LLOYD, JOHN NAME NAME STREET ADDRESS 429 LAKE OF THE WOODS DR STREET ADDRESS CITY-ST-7IP VENICE, FL 34293 CITY-ST-ZIP TITLE ☑ Delete TITLE ☐ Change **■**■ Addition BOYETTE MARSHALL IM SATULAH NAME MORGAN, DONALD NAME 3759 BISCAYNE DRIVE N STREET ADDRESS STREET ADDRESS CITY-ST-7IF NORTH PORT, FL 34286 CITY-ST-7IP VENICE FL 39293 Delete TITLE ☐ Change ŽX Addition DU MORGAN, RUTH 3759 BISCAYNE DRIVE N WEBB, JEAN NAME NAME 414 BIMINI AVE STREET ADDRESS STREET ADDRESS NORTH PORT, FL 34286 CITY-ST-ZIP VENICE, FL 34285 CITY-ST-ZIP TITLE ☑ Delete TITLE Change ☐ Addition NAME JOHANSON, KNUTE NAME STREET ADDRESS 612 BALSAM APPLE DRIVE STREET ADDRESS CITY+ST-ZIP VENICE, FL 34293 CITY-ST-ZIP **⊠** Delete TITLE ☐ Change Addition JOHNSTON, WILLIAM BONANNO, PHILIP 2680 VALENCIA ROAD NAME NAME STREET ADDRESS **5028 SOUTHERN PINE CIRCLE** STREET ADDRESS CITY-ST-ZIP VENICE, FL 34293 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition MILLER, FREDA NAME STREET ADDRESS 4863 ORANGE TREE PL STREET ADDRESS VENICE, FL 34293 CITY-ST-ZIP CITY-ST-ZIP

FILED

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.

ON 9 AND DONALD MORSA CHINA OFFICER OR DIRECTOR SIGNATURE: