

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2006 8:00 am
Secretary of State

03-29-2006 90120 026 ****61.25

DOCUMENT # 707882

1. Entity Name

ARGYLE CHURCH OF CHRIST, INC.



Principal Place of Business

7310 COLLINS ROAD
JACKSONVILLE FL 32244

Mailing Address

7310 COLLINS ROAD
JACKSONVILLE FL 32244



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1069371

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TERRY, BILL
7310 COLLINS ROAD
JACKSONVILLE FL 32244

7. Name and Address of New Registered Agent

Name

Sturgeon, Terry

Street Address (P.O. Box Number is Not Acceptable)

8724 Sanlando Avenue

City

Jacksonville, FL

Zip Code

32211

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

Terry Sturgeon

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

3-21-06

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DV ☐ Delete
NAME SAYRE, LARRY
STREET ADDRESS 4068 SUNRISE FARMS
CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE DT ☐ Delete
NAME STASCHKE, MARK
STREET ADDRESS 4975 ORTEGA FARMS BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE DS ☐ Delete
NAME STURGEON, TERRY
STREET ADDRESS 8724 SANLANDO AVENUE
CITY-ST-ZIP JACKSONVILLE FL 32211

TITLE DP ☐ Delete
NAME SANDERS, WILLIS
STREET ADDRESS 4024 COUNTRY MEADOWS DRIVE
CITY-ST-ZIP MIDDLEBURG FL 32068

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Willis Sanders

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06 (904) 282-9180

Date

Daytime Phone #