## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708953** 

FILED Feb 08, 2006 Secretary of State

Entity Name: CHRIST BY THE SEA UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3755 NORTH ALA VERO BEACH, FL 32963 **Current Mailing Address: New Mailing Address:** 3755 HIGHWAY A1A VERO BEACH, FL 32963 US FEI Number: 59-1223075 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MONROE, BETTY A 2901 21ST PLACE VERO BEACH, FL 32960 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition COOK, JOHN Name: Name: 4118 E REGENCY CT Address: Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: Title: CD () Delete Title: CD (X) Change ( ) Addition COLCLOUGH, DAVID Name: LEMASTERS, JANICE Name: Address: 256 LIVE OAK RD. Address: 117 CACHE CAY DR City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963 Title: () Delete Title: (X) Change ( ) Addition COMOS, JUDY GILLICK, ELIZABETH Name: Name: 1465 TREASURE COAST LA Address: 918 PIRATE COVE LA Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963 Title: ( ) Delete Title: (X) Change ( ) Addition DUNLEVY, WILBUR Name: Name: LACONIS, VINCENT Address: 1690 AVE. Address: 1006 22ND AVE City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32960 Title: ( ) Delete Title: () Change () Addition WOLFE, BETTY Name: Name: 616 8TH PLACE Address: Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MONROE, BETTY ANN PEARCE, FRANK Name: Name: Address: 2901 21 PL Address: 109 PARK SHORES CIR #36W VERO BEACH, FL 32960 VERO BEACH, FL 32963 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BETTY WOLFE D 02/08/2006