

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709458

FILED
May 01, 2006
Secretary of State

Entity Name: THE DELTONA CHRISTIAN CHURCH (DISCIPLES OF CHRIST INC.

Current Principal Place of Business:

960 EAST NORMANDY BLVD
DELTONA, FL 32725 US

New Principal Place of Business:

Current Mailing Address:

960 EAST NORMANDY BLVD
DELTONA, FL 32725 US

New Mailing Address:

FEI Number: 59-3010876 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HAMILTON, LINDA
1031 N HARBOR DR
DELTONA, FL 32725 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: TD () Delete
Name: LESTER, DELORES
Address: 1665 N PAGE DR
City-St-Zip: DELTONA, FL 32725

Title: SD () Delete
Name: KAMENICKY, FRANCES
Address: 2832 E CANAL RD
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: BIGGAR, JAMES
Address: 2211 GAMEWELL CT
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: DEPOY, JAMES
Address: 901 SWALLOW ST
City-St-Zip: DELTONA, FL 32725

Title: PD () Delete
Name: HAMILTON, LINDA
Address: 1031 N HARBOR DR
City-St-Zip: DELTONA, FL 32725

Title: VD () Delete
Name: FREANT, ELIZABETH
Address: 2489 ADAMS AVE
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: COLLETTE, FRANK
Address: 1140 BRADDOCK RD
City-St-Zip: DELTONA, FL 32725

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: LINDA HAMILTON

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date