

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710488

FILED
Feb 02, 2006
Secretary of State

Entity Name: FORT GATLIN ALLIANCE CHURCH OF THE CHRISTIAN AND MISSIONARY ALLIANCE, INC.

Current Principal Place of Business:

3300 S BUMBY AVENUE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

PO BOX 568456
ORLANDO, FL 328568456 US

New Mailing Address:

FEI Number: 59-6211831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANN,RICHARD R
SWANN & HADLEY PA
1031 W MORSE BLVD STE 160
WINTER PARK, FL 32789 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: SD () Delete
Name: DENNEN, THOMAS
Address: 4234 BENEDICTINE CIR
City-St-Zip: ORLANDO, FL 32812

Title: TD () Delete
Name: MCNAIR, GLENN
Address: 1470 BAHIA AVE
City-St-Zip: ORLANDO, FL 32807

Title: PD () Delete
Name: HOFER, CRAIG A
Address: 5227 FORMBY DR
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: NEWCOMB, LINDA
Address: 714 SIOUX DR
City-St-Zip: ORLANDO, FL 32807

Title: TD (X) Change () Addition
Name: ROUGEUX, KATHY
Address: 5306 BARCELONA ST
City-St-Zip: ORLANDO, FL 32807

Title: () Change () Addition
Name:
Address:
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: CRAIG A HOFER

PD

02/02/2006

Electronic Signature of Signing Officer or Director

Date