

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710728

FILED
Jan 25, 2006
Secretary of State

Entity Name: FIRST CHRISTIAN CHURCH OF AVON PARK, FLORIDA, INC.

Current Principal Place of Business:

1016 W. CAMPHOR STREET
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

1016 W. CAMPHOR STREET
AVON PARK, FL 33825

New Mailing Address:

FEI Number: 59-2515495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVRE, ROBERT D
4918 E. LAFLAM RD
AVON PARK, FL 33825 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: T () Delete
Name: OVRE, ROBERT
Address: 4918 E. LAFLAM RD
City-St-Zip: SEBRING, FL 33825

Title: P/D () Delete
Name: BROOKS, JAMES L
Address: 1543 BARBIL LN
City-St-Zip: AVON PARK, FL 33825

Title: D () Delete
Name: HELMS, RICKY G
Address: 313 E CAMPHOR ST (PO BOX 805)
City-St-Zip: AVON PARK, FL 33825

Title: V/D () Delete
Name: TAYLOR, LEE M
Address: 3905 FONSECA AVE.
City-St-Zip: SEBRING, FL 33872

Title: D () Delete
Name: CULPEPPER, RAY
Address: 2636 CAMDEN RD
City-St-Zip: AVON PARK, FL 33826

Title: S () Delete
Name: FOSKEY, ROBERT
Address: 1325 N. RIVERDALE
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BROOKS, JAMES L
Address: 1543 BARBIL LN
City-St-Zip: AVON PARK, FL 33825

Title: V/D (X) Change () Addition
Name: HELMS, RICKY G
Address: 313 E CAMPHOR ST (PO BOX 805)
City-St-Zip: AVON PARK, FL 33825

Title: D (X) Change () Addition
Name: TAYLOR, LEE M
Address: 3905 FONSECA AVE.
City-St-Zip: SEBRING, FL 33872

Title: P/D (X) Change () Addition
Name: CULPEPPER, RAY
Address: 2636 CAMDEN RD
City-St-Zip: AVON PARK, FL 33826

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: ROBERT OVRE

T

01/25/2006

Electronic Signature of Signing Officer or Director

_____ Date