

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

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90048 041 ****61.25

DOCUMENT # 711822

1. Entity Name

SOUTH VENICE CHRISTIAN CHURCH, INC.



Principal Place of Business

**2390 SEABOARD AVENUE
VENICE FL 34293**

Mailing Address

**2390 SEABOARD AVENUE
VENICE FL 34293**



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

59-2465365

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WORTHINGTON, MICHAEL K
2390 SEABOARD AVENUE
VENICE FL 34293**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when re-registering)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **FOX, JAMES**
CITY-ST-ZIP **923 JACINOT W.
VENICE FL 34285**

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **RICHARD CONKLIN**
CITY-ST-ZIP **413 VASTO DR.
VENICE, FL 34285**

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **KOORSEN, NELLIE**
CITY-ST-ZIP **504 WALNUT CIRCLE
VENICE FL 34292**

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **JUNE BRUNE**
CITY-ST-ZIP **134 BAYOU DR
VENICE, FL 34285**

TITLE ☐ Delete
NAME **PDT**
STREET ADDRESS **WORTHINGTON, MICHAEL K**
CITY-ST-ZIP **3793 STERLING RD
VENICE FL 34293**

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BOSS, LOUISE**
CITY-ST-ZIP **2761 FIESTA DR
VENICE FL 34293**

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **MCKEE, BARBARA**
CITY-ST-ZIP **4751 POMPANO RD
VENICE FL 34293**

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

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **KRAUSE, BARBARA**
CITY-ST-ZIP **255 TAMiami JR N #73
NOKOMIS FL 34275**

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:

Michael K Worthington

3/27/06 941-366-1931