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

Secretary of State DOCUMENT # 715344 02-17-2006 90081 020 ****70.00 1. Entity Name LONGWOOD CHURCH OF CHRIST, INC. Principal Place of Business Mailing Address IUUTUUU 1018 NO HWY 17/92 LONGWOOD FL 32750 US 2806 S. FRENCH VE SANFORD FL 32773 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2427617 Not Applicable -Zip-----Country \$8:75-Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LARRY C. PATE Street Address (P.O. Box Number is Not Acceptable) 2806 S. FRENCH AVE. SANFORD FL 32773 City 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 lamiliar with, and accept the obligations of registered agent SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PTD TITLE ☐ Delete TITLE Change ☐ Addition PATE, LARRY C. NAME NAME 2806 S. FRENCH AVE. STREET ADDRESS STREET ADDRESS SANFORD FL 32773 CITY-ST-ZIP CITY-ST-ZIP VD-VICEPRESIDENT WIRELTOR Schange __ Delete TITLE ☐ Addition TITLE Bumbalough Dennis H. 1160 CLARION CIRCLE BUMBALOUGH, DENNIS H NAME_ 1160 CLARION CIRCLE STREET ADDRESS STREET ADDRESS DELTONA FL 32738 CITY-ST-ZIP CITY-ST-ZIP DelTONA, Change ☐ Addition HILE 🗀 Delete TITLE WINKLE, TIMOTHY M NAME NAME STREET ADDRESS 4227 ROCKY RIDGE PLACE STREET ADDRESS CITY-ST-7IP SANFORD FL 32773 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete SNYDER, THOMAS M NAME STREET ADDRESS 209 SANDRA BLVD STREET ADDRESS CITY-ST-7IP SANFORD FL 32773 City-St-7tP ☐ Addition ☐ Delete ☐ Change TITLE TITLE MULLEN, KEITH A NAME NAME 318 RIVIERA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEBARY FL 32713 CITY-ST-ZIP Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ANford 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 withyan address, with all other like empowered.

FILED

Feb 17, 2006 8:00 am

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