

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719754

FILED
Mar 09, 2006
Secretary of State

Entity Name: COURTENAY CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

700 S. COURTENAY PARKWAY
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

700 S COURTNEY PKWY
MERRITT ISLAND, FL 32952 US

New Mailing Address:

FEI Number: 23-7068144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBSON, JIMMY L
657 IROQUOIS ST
MERRITT ISLAND, FL 32952 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: P () Delete
Name: MONTECALVO, GARY D PASTOR
Address: 700 S COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: CLENDINEN, CLAYTON
Address: 3084 SUNSET CT
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: ELROD, ROBERT W
Address: 978 NICKLAUS DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: CAMPBELL, DAVID
Address: 3331 BISCAYNE DR
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONTECALVO, GARY D PASTOR
Address: 301 WESTCHESTER DRIVE
City-St-Zip: COCOA, FL 32926

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

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

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: JIMMY L. DOBSON

D

03/09/2006

Electronic Signature of Signing Officer or Director

Date