2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719892

LEWIS, MINDY

5313 REDBIRD DRIVE

COLUMBUS, IN 47201

4319 SPRINGDALE DRIVE

MINDEL. DAVID C

ODESSA, TX 79762

(X) Delete

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED Jul 08, 2005 Secretary of State

Entity Name: FLORIDA CHRISTIAN CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 1071 S EDGEWOOD AVE JACKSONVILLE, FL 322052382 **Current Mailing Address: New Mailing Address:** 149 WELDON PKWY 11780 BORMAN DRIVE ST. LOUIS, MO 63146 STE 115 MARYLAND HEIGHTS, MO 630433103 US FEI Number: 59-0624397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete DOUGHERTY, CINDY HAGEMANN, DENNIS Name: Name: 1556 ENGLEBROOK DRIVE Address: 5853 DELOR ST Address: City-St-Zip: WILDWOOD, MO 630112093 City-St-Zip: ST LOUIS, MO 63109 US Title: () Delete Title: (X) Change () Addition SPENCER, CHARLES Name: ZIMMERMAN, GARY Name: Address: 4727 BROWN ROAD Address: 95 PEBBLEBROOK LN City-St-Zip: ELLETTSVILLE, IN 47429 City-St-Zip: ST LOUIS, MO 63146 US Title: () Delete Title: (X) Change () Addition CLEELAND, BOB HENDEL, DAVID Name: Name: Address: 1421 WILLS HOLLOW Address: 12124 FAHRPARK LN City-St-Zip: GLENCOE, MO 63038 City-St-Zip: SAINT LOUIS, MO 63146 Title: PD (X) Delete Title: () Change () Addition PAMERLEAU, SUSAN Name: Name: 9749 PHOENIX AVENUE Address: Address: City-St-Zip: UNIVERSAL CITY, TX 47429 City-St-Zip: Title: (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: DENNIS HAGEMANN PRES 07/08/2005

() Change () Addition