

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 25, 2006**  
**Secretary of State**

DOCUMENT# 721602

**Entity Name:** EAU GALLIE CHRISTIAN CHURCH OF MELBOURNE, FLORIDA**Current Principal Place of Business:**FLORIDA  
1720 CROTON RD  
MELBOURNE, FL 32935**New Principal Place of Business:****Current Mailing Address:**FLORIDA  
1720 CROTON RD  
MELBOURNE, FL 32935**New Mailing Address:****FEI Number:** 59-1035312**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ROEHM, TRAVIS L  
1720 CROTON RD.  
MELBOURNE, FL 32935 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:** PICCOLI, PETE  
**Address:** 1952 WEST SHORES RD.  
**City-St-Zip:** MELBOURNE, FL 32935**Title:** VD ( ) Delete  
**Name:** WOODFORD, DAVID  
**Address:** 1201 PAWNEE TERRACE  
**City-St-Zip:** INDIAN HARBOR BEACH, FL 32937**Title:** D ( ) Delete  
**Name:** WADESON, DOUGLAS  
**Address:** 453 RED SAIL WAY  
**City-St-Zip:** SATELLITE BEACH, FL 32937**Title:** PD ( ) Delete  
**Name:** ARMSTRONG, SCOTT  
**Address:** 1069 LEE AVENUE NW  
**City-St-Zip:** PALM BAY, FL 32907**Title:** D ( ) Delete  
**Name:** ARMSTRONG, NORMAN  
**Address:** 473 ARCHER ROAD S.E.  
**City-St-Zip:** PALM BAY, FL 32909**Title:** SD ( ) Delete  
**Name:** ARMSTRONG, SCOTT  
**Address:** 1069 LEE AVENUE NW  
**City-St-Zip:** PALM BAY, FL 32907**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VD (X) Change ( ) Addition  
**Name:** DAVIS, LARRY  
**Address:** 1254 KARLOVY AVE. NW  
**City-St-Zip:** PALM BAY, FL 32907**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** PD (X) Change ( ) Addition  
**Name:** GISH, DAN  
**Address:** 1541 HALSTEAD AVE. NW  
**City-St-Zip:** PALM BAY, FL 32907**Title:** D (X) Change ( ) Addition  
**Name:** MCGARRIGLE, MICHAEL  
**Address:** 2246 WHISPER WIND CIRCLE  
**City-St-Zip:** MELBOURNE, FL 32935**Title:** SD (X) Change ( ) Addition  
**Name:** ROESCH, JAMES  
**Address:** 3555 HEARTWOOD LANE  
**City-St-Zip:** MELBOURNE, FL 32934

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: MICHAEL MCGARRIGLE

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11/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date