# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 03, 2006 08:00 AM**
**Secretary of State**

DOCUMENT # 727818

1. Entity Name
THE CHRISTIAN FELLOWSHIP OF BROOKSVILLE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 7391 LYKES DUBLIN RD<br>BROOKSVILLE, FL 34601 US | 7391 LYKES DUBLIN RD<br>BROOKSVILLE, FL 34601 US |

02282006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
59-2304450

Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROBERTS, JAMES E SR
7391 LYKES DUBLIN RD
BROOKSVILLE, FL 34601

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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 _____

**Filing Fee is $61.25**
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | VD |
| NAME | SMITH, MR GERALD |
| STREET ADDRESS | 6144 NEFF LK RD |
| CITY ST ZIP | BROOKSVILLE, FL |
| TITLE | STD |
| NAME | JACKSON, ROSSO |
| STREET ADDRESS | 13119 TAFT ST. |
| CITY ST ZIP | BROOKSVILLE, FL |
| TITLE | PD |
| NAME | ROBERTS, JAMES E. |
| STREET ADDRESS | 7391 LYKES DUBLIN RD |
| CITY ST ZIP | BROOKSVILLE, FL |
| TITLE | S |
| NAME | RATTERREE, TIM |
| STREET ADDRESS | 37200 LOCK ST |
| CITY ST ZIP | DADE CITY, FL 33523. |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY ST ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY ST ZIP | |

U00000561817
05/19/06-80031-001 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Rosso Jackson ROSSO JACKSON, STD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR