

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728979

FILED
Apr 27, 2006
Secretary of State

Entity Name: TOMOKA CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

1151 W. GRANADA BLVD.
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1151 W. GRANADA BLVD.
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-6555190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMERY, III, WILLIAM V.
2914 CYPRESS RIDGE TRAIL
DAYTONA BEACH, FL 32124 US

Name and Address of New Registered Agent:

DAVIDSON, JUDY
33 S ST ANDREWS DR
ORMOND BEACH, FL 32174 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: JUDY DAVIDSON

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: DAVIDSON, JUDY
Address: 33 S ST ANDREWS DR
City-St-Zip: ORMOND BCH, FL 32174

Title: T () Delete
Name: GOSSMAN, RALPH
Address: 24 FOREST VIEW WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: TCD () Delete
Name: FRAINE, CLIFF
Address: 14 BRIAN JAMES WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: S () Delete
Name: PILCHER, GEORGE
Address: 21 JANET CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD () Delete
Name: ANDERSON, DAVE
Address: 47 ST ANDREWS DR
City-St-Zip: ORMOND BCH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TCD (X) Change () Addition
Name: FRAINE, CLIFF
Address: 26 GREENVALE DR
City-St-Zip: ORMOND BEACH, FL 32174

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: RALPH GOSSMAN

T

04/27/2006

Electronic Signature of Signing Officer or Director

Date