


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 09, 2005 8:00 am**  
**Secretary of State**

09-09-2005 90034 005 \*\*\*61.25

<b>DOCUMENT # 731753</b> 1. Entity Name <b>BEACON COMMUNITY EVANGELICAL FREE CHURCH, INC.</b>						
Principal Place of Business <b>9025 STAR TRAIL NEW PORT RICHEY, FL 34654</b>			Mailing Address <b>9025 STAR TRAIL NEW PORT RICHEY, FL 34654</b>			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
<b>HUNDLEY, ROBERT 13021 SERPENTINE DR HUDSON, FL 34667</b>				Name <b>Edward Downey</b> Street Address (P.O. Box Number is Not Acceptable) <b>12810 Box Dr</b> City <b>Hudson</b> <b>FL</b> Zip Code <b>34667</b>		
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 <u><i>Edward M Downey</i></u> <span style="float: right;">9-4-05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>						
<b>Filing Fee is \$61.25 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>		
<b>Make check payable to Florida Department of State</b>						
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>DEWEERD, DAVID</b>			NAME		
STREET ADDRESS	<b>13021 SERPENTINE DR</b>			STREET ADDRESS		
CITY-ST-ZIP	<b>HUDSON, FL 34667</b>			CITY-ST-ZIP		
TITLE	MD <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>JONES, PATRICK</b>			NAME		
STREET ADDRESS	<b>12817 BANYAN ST</b>			STREET ADDRESS		
CITY-ST-ZIP	<b>HUDSON, FL 34669</b>			CITY-ST-ZIP		
TITLE	TD <input checked="" type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>KEHOE, THOMAS</b>			NAME		
STREET ADDRESS	<b>6609 RIDGE RD</b>			STREET ADDRESS		
CITY-ST-ZIP	<b>PORT RICHEY, FL 34668</b>			CITY-ST-ZIP		
TITLE	CSD <input type="checkbox"/> Delete			TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>HUNDLEY, ROBERT</b>			NAME	<b>D</b>	
STREET ADDRESS	<b>7575 CYPRESS KNOLL DR</b>			STREET ADDRESS		
CITY-ST-ZIP	<b>NEW PORT RICHEY, FL 34653</b>			CITY-ST-ZIP		
TITLE	<b>BOARD CHAIRMAN</b> <input type="checkbox"/> Delete			TITLE	CSD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>Edward Downey</b>			NAME	<b>Edward Downey</b>	
STREET ADDRESS	<b>12810 Box Dr</b>			STREET ADDRESS	<b>12810 Box Dr</b>	
CITY-ST-ZIP	<b>Hudson FL 34667</b>			CITY-ST-ZIP	<b>Hudson, FL 34667</b>	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u><i>Edward M Downey</i></u> <span style="float: right;">9-4-05</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>						

