

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735462

FILED
Apr 05, 2006
Secretary of State

Entity Name: GREEN COVE SPRINGS CHURCH OF CHRIST, INC.

Current Principal Place of Business:

479 HOUSTON ST.
GREEN COVE SPRG, FL 32043

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 143
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

479 HOUSTON ST.
GREEN COVE SPRINGS, FL 32043 US

FEI Number: 59-2969285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOHM, DONALD A
3328 OAK LANE
GREEN COVE SPRINGS, FL 32043 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: PD () Delete
Name: CHIDESTER, DAVID
Address: 1204 MELROSE AVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: SOHM, DONALD A,
Address: 3328 OAK LANE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: CARY, WALTER H JR
Address: 1632 HARRING STREET
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S () Delete
Name: MCELLOWNEY, CLAUDE,
Address: 2916 BRIARPATCH PL
City-St-Zip: GREEN COVE SPRGS, FL 32043

Title: P () Delete
Name: TENNANT, RANDY PAUL
Address: 1747 CINNAMON DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: LOWE, ROBERT CRAIG III
Address: 4688 GOPHER STREET
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: CLAUDE MCELLOWNEY

S

04/05/2006

Electronic Signature of Signing Officer or Director

Date