

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 30, 2010
Secretary of State**

DOCUMENT# 736079

Entity Name: CENTER POINT COMMUNITY CHURCH OF NAPLES, INC.**Current Principal Place of Business:**6590 GOLDEN GATE PKWY
NAPLES, FL 34105 US**New Principal Place of Business:****Current Mailing Address:**6590 GOLDEN GATE PKWY
NAPLES, FL 34105 US**New Mailing Address:****FEI Number:** 59-1685912**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JONES, SCOTT
6590 GOLDEN GATE PARKWAY
NAPLES, FL 34105 US**Name and Address of New Registered Agent:**BUCKEL, ROB
6590 GOLDEN GATE PARKWAY
NAPLES, FL 34105 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: ROB BUCKEL

07/30/2010

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: VD
Name: BUCKEL, ROB
Address: 6590 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: TD
Name: WYNN, MICHAEL
Address: 6590 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: SD
Name: POTTER, TOM
Address: 6590 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: D
Name: JONES, SCOTT
Address: 6590 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

I hereby 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 all other like empowered.

SIGNATURE: TOM POTTER

SD

07/30/2010

Electronic Signature of Signing Officer or Director_____
Date