

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739156

FILED
Apr 28, 2005
Secretary of State

Entity Name: COMMUNITY CHRISTIAN ASSEMBLY OF GOD OF JUPITER/TEQUESTA, INC.

Current Principal Place of Business:

100 S. PENNOCK LANE
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

100 S. PENNOCK LANE
JUPITER, FL 33458

New Mailing Address:

FEI Number: 59-1874899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLPE, ROBERT M.
903 OAK CIR
JUPITER, FL 33458 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: SD () Delete
Name: EIDSON, ROBERT
Address: 106 BENT ARROW DRIVE
City-St-Zip: JUPITER, FL 33458

Title: PD () Delete
Name: VOLPE, ROBERT M
Address: 903 OAK CIR
City-St-Zip: JUPITER, FL

Title: D () Delete
Name: KEY, GREG
Address: 135 PINE HAMMOCK CT
City-St-Zip: JUPITER, FL 33458

Title: D (X) Delete
Name: MC CANN, TIMOTHY
Address: 6459 UNGERER STREET
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: PLANES, TONY
Address: 6447 FOSTER STREET
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: FLECK, BRIAN
Address: 350 CELESTIAL WAY #1
City-St-Zip: JUNO BEACH, FL 33408

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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 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 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: ROBERT M. VOLPE

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date