
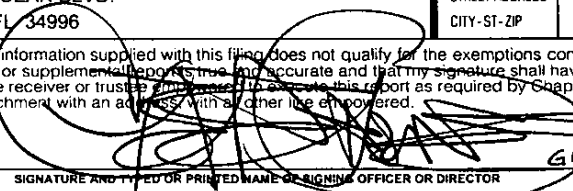


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

01-12-2006 90195 041 ****70.00

DOCUMENT # 741312					
1. Entity Name STUART CHURCH OF CHRIST, INC.					
Principal Place of Business 500 PALM BCH RAOD STUART, FL 34994			Mailing Address P O BOX 164 STUART, FL 34995		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2349638	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LACONTE, PATRICK 3933 SE FAIRWAY EAST STUART, FL 34997			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		
			Zip Code		
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 _____ DATE _____					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEEM, JOE		NAME		
STREET ADDRESS	2017 SE ALLAMANDA DRIVE		STREET ADDRESS		
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34952		CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HICKS, CHARLES		NAME		
STREET ADDRESS	2422 SW MADRUGA ST.		STREET ADDRESS		
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34953		CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEONARD, WILLIE		NAME		
STREET ADDRESS	2732 RAWLINGS RD		STREET ADDRESS		
CITY-ST-ZIP	PT ST LUCIE, FL 34952		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALLARD, JACK		NAME		
STREET ADDRESS	13220 HIGHWAY 441 SOUTH		STREET ADDRESS		
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWAYNE, BOB		NAME		
STREET ADDRESS	3891 SE FAIRWAY WEST		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	V/S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARNES, GENE		NAME		
STREET ADDRESS	1913 NE OCEAN BLVD.		STREET ADDRESS		
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 and have not resigned from 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 other line empowered.					
SIGNATURE: 			Gene Barnes 3 5 06 772-334-4697		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		



ATTACHMENT

66004721

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2006

STUART CHURCH OF CHRIST, INC.
P O BOX 164
STUART, FL 34995

Subject: STUART CHURCH OF CHRIST, INC.

Reference Number:

741312

PRINT DOCUMENT
AGAIN + MAKE
CHANGES AGAIN
+ GET GENE ON JOB
TO SIGN AGAIN

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$70.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The person that signed the annual report/uniform business report is not listed as a current officer/director of the corporation. The person signing must be listed as a current officer/director on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cc

ANNUAL REPORTS SECTION