

NOTIFICATION

FILED
Mar 31, 2006 08:00 AM
Secretary of State



1st MOORE CR2E037 (10/05)

FIFTH AVENUE CHURCH OF CHRIST, INC.



Principal Place of Business Mailing Address
% CHARLES E. CLAYTON PO BOX 2184
5TH AVE CHURCH OF CHRIST POB 2184 BARTOW FL 33830
BARTOW FL 33830

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number NO-T APPLICABLE Applied Fee Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUSSELL, CHARLES
2415 E. WASHINGTON STREET
BARTOW FL 33830

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 CHARLES RUSSELL

SD *Charles Russell*

3/28/06

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 VP
NAME BIGGS, BRADFORD R
STREET ADDRESS 1095 W. KING ST.
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP
U00000487277
04/13/06-80071-004 61.25

TITLE SD
NAME RUSSELL, CHARLES
STREET ADDRESS 2415 E. WASHINGTON ST.
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME MANNING, JAMES A
STREET ADDRESS 1915 HAMILTON ST
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PTD
NAME CLAYTON, CHARLES E
STREET ADDRESS 2999 SIMPSON DR
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME RICE, GEORGE ANDREW
STREET ADDRESS 2020 E. HAMILTON STREET
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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

Charles E. Clayton 03/28/06 08:00 AM