

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # 748948 1. Entity Name DEERFIELD CHURCH OF CHRIST, INC.	
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Principal Place of Business 360 SW 2ND AVENUE DEERFIELD BEACH, FL 33441	Mailing Address 360 SW 2ND AVENUE DEERFIELD BEACH, FL 33441
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DO NOT WRITE IN THIS SPACE



01082006 No Chg-NP CR2E037 (11/05)

4. FEI Number **59-1968982** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WARD, HENRY
360 S.W. 2 AVENUE
DEERFIELD BEACH, FL 33441**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WARD, HENRY 267 NW 30TH AVE FT LAUDERDALE FL,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT BLUNT, SAMPSON 337 NW 30TH AVE FT LAUDERDALE FL,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANT, AL 370 SW 14TH ST DEERFIELD BEACH, FL 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEEL, CECIL 3010 S.W. 2ND COURT FORT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, ANTHONY 6556 NW 127TH TERRACE PARKLAND, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000434493
02/25/06-80005-001 61.25

**DO NOT WRITE
IN THIS SPACE**

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 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: Sampson Blunt 01/09/06 954 584 2021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #