

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2005 8:00 am
Secretary of State

06-09-2005 90002 023 ****61.25

DOCUMENT # 755923

1. Entity Name
POINCIANA CHRISTIAN CHURCH, INC.



Principal Place of Business
**4900 PLEASANT HILL RD.
KISSIMMEE, FL 34759**

Mailing Address
**4900 PLEASANT HILL RD.
KISSIMMEE, FL 34759**

2. Principal Place of Business
3181 Pleasant Hill Rd

3. Mailing Address
3181 Pleasant Hill Rd

City & State
Kissimmee FL

Country
Oscola

Zip
34746



05192005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2253302

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**ATTEBERY, MARILYN
3181 PLEASANT HILL ROAD
KISSIMMEE, FL 34746**

7. Name and Address of New Registered Agent

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 *[Signature]* **6/4/05**

(NOTE: Registered agent signature required when reinstating)

**Filing Fee is \$61.25
Due by September 7, 2005**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ECBD TARANGER, NILS 2335 PINE TREE COURT KISSIMMEE, FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEVE PETROULAKIS 738 YUCATAN CT KISSIMMEE, FL 34758	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDVC HOGAN, ED 3000 PINERIDGE CIRCLE KISSIMMEE, FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD COPP, ROBERT 807 NELSON DRIVE KISSIMMEE, FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSD JIM SULLIVAN 1734 CONIFER AVENUE KISSIMMEE, FL 34758	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>FL</i> <i>Paul Wasmund</i> <i>225 Shore Dr</i>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Elder Colleen Bar</i> <i>Paul Wasmund</i> <i>225 Shore Dr</i> <i>Winter Haven FL 33884</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Trustee</i> <i>Everett (Mac) McCarty</i> <i>175 Cape Florida Dr</i> <i>Kissimmee FL 34759</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Chairman of the Board / Elder</i> <i>Joan Whitely</i> <i>831 Mangrove Ct</i> <i>Kissimmee FL 34759</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Deacon</i> <i>Eric Wooty</i> <i>865 Adair Dr</i> <i>Kissimmee FL 34759</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>DSD</i> <i>Bob Sample</i> <i>4126 Bald Eagle Drive</i> <i>Kissimmee FL 34746</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Deacon</i> <i>Wayne Glover</i> <i>1533 Trumbull St</i> <i>Kissimmee FL 34744</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *[Signature]* **6/4/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #