2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 10, 2006 8:00 am Secretary of State

04-10-2006 90301 010 ****61.25

DOCUMENT #755923 POINCIANA CHRISTIAN CHURCH, INC. 60026338 Principal Place of Business Mailing Address 3181 PLEASANT HILL RD 3181 PLEASANT HILL RD KISSIMMEE, FL 34746 KISSIMMEE, FL 34746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03262006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 59-2253302 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ATTEBERY, MARILYN Street Address (P.O. Box Number is Not Acceptable) 3181 PLEASANT HILL ROAD KISSIMMEE, FL 34746 City Zip Code FL 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 X (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2006 Trust Fund Contribution. Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ECBD Delete TITLE TITLE E Change Addition TARANGER NILS NAME NAME Jim Chesser 2335 PINE TREE COURT STREET ADDRESS STREET ADDRESS 610 Yak Court CITY-ST-ZIP KISSIMMEE, FL CITY-ST-ZIP Kissimmer F1 34759. TD ☐ Delete TITLE Change ☐ Addition TITLE NAME STEVE PETROULAKIS NAME STREET ADDRESS 738 YUCATAN CT STREET ADDRESS KISSIMMEE, FL 34758 CITY-ST-7iP CITY-ST-ZIP ECC ☐ Delete TITLE Change ☐ Addition TITLE WASMUND, PAUL NAME NAME 225 SHORE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE MCCARTY, EVERETT NAME NAME

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.

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Delete

☐ Detete

SIGNATURE AND TYPED OR PRIN ED NAME OF SIGNING OFFICER OR DIRECTO

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

175 CAPE FLONDE DR

KISSIMMEE, FL 34759

KISSIMMEE, FL 34759

KISSIMMEE, FL 34759

WUNITY, JASEN

831 MARGUIS CT

WNITY, ERIC

865 ADOUR DR

COBE

D

Eriz Whiling

ECE

7)

Jasen Whiting.

831 marquisct

Eric Whiting. 508 Pintail Cr

Kissimmee, FI 34759

Aubandale F1 33823

Change

The ange

Addition

☐ Addition