

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756526

FILED
Mar 01, 2006
Secretary of State

Entity Name: JUPITER FARMS COMMUNITY CHURCH, INC.

Current Principal Place of Business:

12600 W INDIANTOWN RD
JUPITER, FL 334781678 US

New Principal Place of Business:

Current Mailing Address:

12600 W INDIANTOWN RD
JUPITER, FL 334781678

New Mailing Address:

FEI Number: 59-2470029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYER, JAMES G PRES
444 CANAL DR
LAKE WALES, FL 33859 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TREA () Delete
Name: KATHY LOLMAUGH,
Address: 5966 LOXAHATCHEE PINES RD
City-St-Zip: JUPITER, FL 334584408

Title: D () Delete
Name: TEEL, PATRICIA
Address: 16823 127TH DRIVE NORTH
City-St-Zip: JUPITER, FL 334786077

Title: SEC. () Delete
Name: RAGOSA, BRUETTE
Address: 10237 157TH ST. N.
City-St-Zip: JUPITER, FL 33478

Title: D () Delete
Name: HAYTON, KATHY
Address: 17971 MELLEN LANE
City-St-Zip: JUPITER, FL 33478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change () Addition
Name: DIANE SPALLONE,
Address: 18851 125TH AVE NORTH
City-St-Zip: JUPITER, FL 334786077

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE SPALLONE

TREA

03/01/2006

Electronic Signature of Signing Officer or Director

Date