2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765205

FILED Apr 12, 2006 Secretary of State

Entity Name: CHURCH OF CHRIST OF OCOEE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2 E MAGNOLIA OCOEE, FL 34761

Current Mailing Address: New Mailing Address:

2 E MAGNOLIA OCOEE, FL 34761

FEI Number: 59-2353022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORAN, PATRICK N.
13 N. OAKDALE STREET
WINDERMERE, FL 34786 US

MORAN, PATRICK N.
13 N. OAKDALE STREET
WINDERMERE, FL 32786 US

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: 04/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: VD () Delete Title: VD (X) Change () Addition

 Name:
 TURNER, EDDIE W
 Name:
 TURNER, EDDIE W

 Address:
 333 WINTER ST.
 Address:
 3750 JANE STREET

 City-St-Zip:
 WINTER GARDEN, FL 34787
 City-St-Zip:
 GOTHA, FL 34734

Title: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 MORAN, PATRICK N.
 Name:
 MORAN, PATRICK N.

 Address:
 13 N. OAKDALE STREET
 Address:
 13 N. OAKDALE STREET

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:
 WINDERMERE, FL 32786

Title: DS () Delete Title: () Change () Addition

 Name:
 HARTBARGER, DAVID A.
 Name:

 Address:
 1 SOUTH LAKEWOOD AVE.
 Address:

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{(X) Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 EFURD, WAYNE C
 Name:

 Address:
 203 S. CUMBER LAND AVE.
 Address:

 City-St-Zip:
 OCOEE, FL 34761
 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: DAVID A. HARTBARGER DS 04/12/2006