

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 850618

1. Entity Name
COMMONWEALTH CHURCH FINANCE, INC.



Principal Place of Business
**677 JONESBORO ROAD
MCDONOUGH, GA 30253 US**

Mailing Address
**P. O. BOX 1620
STOCKBRIDGE, GA 30281 US**



02072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-1450538

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	TURNER, DAVID A
STREET ADDRESS	677 JONESBORO ROAD
CITY-ST-ZIP	MCDONOUGH, GA 30253
TITLE	V
NAME	UNRUH, DWAIN E.
STREET ADDRESS	677 JONESBORO ROAD
CITY-ST-ZIP	MCDONOUGH, GA 30253
TITLE	VD
NAME	NORTH, RONALD W
STREET ADDRESS	677 JONESBORO ROAD
CITY-ST-ZIP	MCDONOUGH, GA 30253
TITLE	S
NAME	SIEGEL, JEFFERY S
STREET ADDRESS	677 JONESBORO RD.
CITY-ST-ZIP	MCDONOUGH, GA 30253
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 607, 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: David Turner **A David Turner, President/CEO** 02/07/06 678.583.9760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #