2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N00000000905 01-18-2005 90041 046 ****61.25 CHRISTIAN CENTER CHURCH INC. Principal Place of Business Mailing Address 4791 SHEFFIELD DR PO BOX 450 40002005 MARIANNA, FL 32446 MARIANNA, FL 32447 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122005 Chg-NP CR2E037 (10/03) 4. FEI Number 59-3680684 Applied For City & State City & State Not Applicable Zφ Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOLLIS, JACK E Street Address (P.O. Box Number is Not Acceptable) 4476 BROAD ST-. . MARIANNA, FL 32446 City 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 Stangage, typed or printed name of registered agent and title if applicable DATE (NOTE. Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE Delete TITLE HOLLIS, JACK E NAME NAME STREET AUTORESS 4476 BROAD ST STREET ADDRESS MARIANNA, FL 32446 CITY-ST-ZIP CITY-ST-ZIP DV Delete TITLE Mago, Genous R. Jr. Change ☐ Addition TITLE MAYO, GENOUS RUIR MME NAME 2955 Hunter Fish Comp Rd STREET ADDRESS 103 FOREST ST STREET ADDRESS CITY-ST-ZIP HAZELHURST, GA 31539 CITY-ST-ZIP Marianna, Fl 32446 DS ☐ Change Addition TITLE TITLE ☐ Delete HOLLIS, SHELLIE F NAME NAME STREET ADDRESS 4476 BROAD ST STREET ADDRESS CITY-ST-ZIP MARIANNA, FL 32446 CITY-ST-ZIP Change Addition TITLE ☐ Defete TITLE ARNOLD, ZACHARY L NAME 4466 PUTNAM ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARIANNA, FL 32446 CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition PRIETZ, RICHARD NAME NAME 2985 OLD US RD STREET ADDRESS EXPRET ADDRESS MARIANNA, FL 32446 CITY-ST-ZIP CITY-ST-ZIP ■ Addition ☐ Change ☐ Dolete TITLE TITLE DAVIS, DAVID W NAME NAME **4338 SOUTH ST** STREET ADDRESS STREET ADDRESS MARIANNA, FL 32448 CITY-S1-ZIP CITY-ST-7/P

12. Thereby 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: _

FILED

Jan 18, 2005 8:00 am