

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008191

FILED  
Jan 06, 2006  
Secretary of State

**Entity Name:** RIGHT ACTION CHURCH, INCORPORATED

**Current Principal Place of Business:**

33195 US HIGHWAY 19 N - 130  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

4633 DUHMY RD  
1-D  
ST PETERSBURNG, FL 33708

**Current Mailing Address:**

1820 OAK AVENUE  
CARLSBAD, CA 92008

**New Mailing Address:**

**FEI Number:** 58-2603441

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, ELLEN G  
4633 DUHMY RD., 1-D  
ST. PETERSBURG, FL 33708 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: D ( ) Delete  
Name: WILLIAMS, ELLEN G  
Address: 1820 OAK AVE  
City-St-Zip: CARLSBAD, CA 92008

Title: DIR ( ) Delete  
Name: COX, JOANNE  
Address: 4633 DUHMY RD 1-D  
City-St-Zip: ST PETERSBURG, FL 33708

Title: DIR ( ) Delete  
Name: NORTON, M.C.  
Address: 3156 VISTA WAY SUITE 200  
City-St-Zip: CARLSBAD, CA 92056

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ELLEN G WILLIAMS

PRES

01/06/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date