


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90128 043 ****61.25

DOCUMENT # N01000003337 1. Entity Name PANTHER RIDGE CHURCH OF CHRIST INC.	
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Principal Place of Business 23706 79TH AVE. EAST BRADENTON, FL 34243 US	Mailing Address 904 CYPRESS WOOD LANE SARASOTA, FL 34243 US
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DO NOT WRITE IN THIS SPACE



03172005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-1104143	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WALTON, EDGAR A
3702 36 AVE DR. WEST
~~SARASOTA, FL 34243~~
BRADENTON FL 34205

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COOLEY, WILLIAM T SR. 904 CYPRESS WOOD LANE SARASOTA, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ADAMS, LARRY G 5324 4TH ST EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LEMON, PAUL A 6712 34TH AVE EAST BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CASEY, GENE 5117 19 TH LANE EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby 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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #