

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90258 013 ****70.00

DOCUMENT # N02000003518					
1. Entity Name EPPS CHRISTIAN CENTER, INC.					
Principal Place of Business 325 NORTH A STREET PENSACOLA, FL 32501			Mailing Address 6250 COLLEGE BLVD PENSACOLA, FL 32504		
400558					
2. Principal Place of Business <i>2300 North Pace Blvd</i>		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City/State <i>Pensacola FL</i>		City & State		4. FEI Number 36-4495645	
Zip 32505		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TISDALE, SYLVIA E 325 NORTH A STREET PENSACOLA, FL 32501			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ DATE _____ Signature, typewritten or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD TISDALE, SYLVIA E 6250 COLLEGE BLVD PENSACOLA, FL 32504	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D HILL, ROBERT 312 S. MILE ROAD PENSACOLA, FL 32513	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D TISDALE, PAMELA 6250 COLLEGE BLVD. PENSACOLA, FL 32504	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD TISDALE, JOSHUA 6250 COLLEGE BLVD PENSACOLA, FL 32504	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D BLAIR, BRUCE 607 PALM CRT PENSACOLA, FL 32505	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D BLAIR, DONNA 607 PALM CRT PENSACOLA, FL 32505	☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition				
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 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: <i>Sylvia E. Tisdale</i> 3/16/06 (850) 572-5761					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					