

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 01, 2007 08:00 AM
Secretary of State**

DOCUMENT # N02000003518

**1. Entity Name
EPPS CHRISTIAN CENTER, INC.**



**Principal Place of Business
2300 NORTH PLACE BLVD
PENSACOLA, FL 32505**

**Mailing Address
6250 COLLEGE BLVD
PENSACOLA, FL 32504**



02272007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
36-4495645**

**Applied For
Not Applicable**

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**

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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

**Filing Fee is \$61.25
Due by May 1, 2007**

**9. Election Campaign Financing
Trust Fund Contribution.**



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

**TITLE PD
NAME TISDALE, SYLVIA E
STREET ADDRESS 6250 COLLEGE BLVD
CITY-ST-ZIP PENSACOLA, FL 32504**

**TITLE D
NAME HILL, ROBERT
STREET ADDRESS 312 S. MILE ROAD
CITY-ST-ZIP PENSACOLA, FL 32513**

**TITLE D
NAME TISDALE, PAMELA
STREET ADDRESS 6250 COLLEGE BLVD.
CITY-ST-ZIP PENSACOLA, FL 32504**

**TITLE TD
NAME TISDALE, JOSHUA
STREET ADDRESS 6250 COLLEGE BLVD
CITY-ST-ZIP PENSACOLA, FL 32504**

**TITLE D
NAME BLAIR, BRUCE
STREET ADDRESS 607 PALM CRT
CITY-ST-ZIP PENSACOLA, FL 32505**

**TITLE D
NAME BLAIR, DONNA
STREET ADDRESS 607 PALM CRT
CITY-ST-ZIP PENSACOLA, FL 32505**

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03/12/07-80033-018 70.00

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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:

Sylvia E. Tisdale
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/07 *(850) 572-5761*
Date Daytime Phone #