2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000005479

1. Entity Name
DEEP CREEK COMMUNITY CHURCH, INC.

Principal Place of Business	Mailing Address
3101 SULSTONE DR UNIT B PUNTA GORDA, FL 33983	3101 SULSTONE DR. UNIT B PUNTA GORDA, FL 33983

DO NOT WRITE IN THIS SPACE

03202007 No Chg-NP CR2E037 (4/06)

4. FEI Number
68-0515238
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, ALEXANDER J
23205 BILLINGS AVE.
PORT CHARLOTTE, FL 33954

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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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	GLOVER, STEVEN E
STREET ADDRESS	26530 BARRANGVILLA AVE
CITY-ST-ZIP	PUNTA GORDA, FL 33983
TITLE	SD
NAME	BURGESS, MIKE
STREET ADDRESS	23355 DUCHESS AVENUE
CITY-ST-ZIP	PORT CHARLOTT, FL 33954
TITLE	VTD
NAME	COOK, ALEXANDER J
STREET ADDRESS	23205 BILLINGS AVENUE
CITY-ST-ZIP	PORT CHARLOTTE, FL 33954
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/13/07-80032-002 61.25

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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: _____ Vice President 3/20/07 941 235-7325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #