## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000006440

Entity Name: LCCP MINISTRIES INCORPORATED

FILED Sep 04, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 190 510 STREET SE OLD TOWN, FL 326809695 **Current Mailing Address: New Mailing Address:** 190 510 STREET SE OLD TOWN, FL 326809695 FEI Number: 05-0536027 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PERRAULT, LEO J JR 190 150 STREET SE OLD TOWN, FL 326809695 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PEDT () Delete () Change () Addition PERRAULT, LEO J JR Name: Name: 190 150 STREET SE Address: Address: City-St-Zip: OLD TOWN, FL 326809695 City-St-Zip: Title: EAV () Delete Title: () Change () Addition PERRAULT, PATRICIA A Name: Name: Address: 190 510 STREET SE Address: City-St-Zip: OLD TOWN, FL 326809695 City-St-Zip: Title: DS () Delete Title: () Change () Addition LAMBERT, CYNTHIA J Name: Name: Address: 2438 28 STREET NORTH Address: City-St-Zip: SAINT PETERSBURG, FL 33713 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition LAMBERTBOGGS, ROBIN S Name: DRAPER, KATHLEEN M Name: 9209 SEMINOLE BLVD Address: 190 SE 510 ST Address: City-St-Zip: OLD TOWN, FL 32680 City-St-Zip: SEMINOLE, FL 33708 Title: () Delete Title: () Change () Addition MERCER, JOSEPH D Name: Name: 17990 N W HWY 19 Address: Address: City-St-Zip: FANNING SPRINGS, FL 32693 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition COSBY, CHARLES D DARKINS, CAROL J Name: Name: Address: 2438 28 ST N Address: 164 SE 692 ST ST PETERSBURG, FL 33713 OLD TOWN, FL 32680 City-St-Zip: 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: LEO J PERRAULT JR ED 09/04/2006