2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2007
Secretary of State

DOCUMENT# N03000008158

Entity Name: GULFPORT COMMUNITY CHURCH, INC.

Current Principal Place of Business:

P.O. BOX 530306
GULFPORT, FL 337070306

New Principal Place of Business:

2309 49TH ST S.
GULFPORT, FL 33707

Current Mailing Address:

P.O. BOX 530306
GULFPORT, FL 337070306

New Mailing Address:

2309 49TH ST S.
GULFPORT, FL 33707

FEI Number: 20-0336625 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIES, JOHN
10265 ULMERTON RD #53
LARGO, FL 33771 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: RIES, JOHN
Address: 10265 ULMERTON RD #53
City-St-Zip: LARGO, FL 33771

Title: TS ( ) Delete
Name: RIES, BARBARA
Address: 10265 ULMERTON RD #53
City-St-Zip: LARGO, FL 33771

Title: D ( ) Delete
Name: KEPNER, KEN
Address: 10488 HAZEL STREET
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete
Name: KEPNER, CAROL
Address: 10488 HAZEL STREET
City-St-Zip: LARGO, FL 33778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: JOHN A. RIES P 04/21/2007
Electronic Signature of Signing Officer or Director — Date