

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90133 045 ****61.25

DOCUMENT # N03021

1. Entity Name
SWISS COVE CHRISTIAN CHURCH, INC.



Principal Place of Business
**1965 STATE ROAD 13
JACKSONVILLE, FL 32259**

Mailing Address
**1965 STATE ROAD 13
JACKSONVILLE, FL 32259**

50006656

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03232006

Chg-NP

CR2E037 (11/05)

4. FEI Number

59-2403764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BURNAM, R. LAVON
1235 LEMONWOOD ROAD
JACKSONVILLE, FL 32259**

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

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, 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 DVC ☐ Delete
NAME CASH, JAMES
STREET ADDRESS 12769 EDENBRIDGE CT
CITY-ST-ZIP JACKSONVILLE, FL 32223

TITLE D ☒ Delete
NAME BURRESS, HOMER
STREET ADDRESS 11577 WEST RIDE DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32223

TITLE D ☐ Delete
NAME JOHNSON, ALBERT
STREET ADDRESS 5216 RIVER PARK VILLAS DR
CITY-ST-ZIP SAINT AUGUSTINE, FL 32092

TITLE D ☐ Delete
NAME BURNAM, LAVON
STREET ADDRESS 1235 LEMONWOOD ROAD
CITY-ST-ZIP JACKSONVILLE, FL

TITLE D ☒ Delete
NAME WIGGINS, BURLE
STREET ADDRESS 1191 EAGLE BLUFF LANE
CITY-ST-ZIP JACKSONVILLE, FL 32259

TITLE D ☐ Delete
NAME SEPULVEDA, DAVID
STREET ADDRESS 904 JETTY CT
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Boykin, Jesse
STREET ADDRESS 12442 Joda Lane
CITY-ST-ZIP Jacksonville, FL 32258

TITLE D ☐ Change ☒ Addition
NAME Wright, David
STREET ADDRESS 1975 State Road 13
CITY-ST-ZIP Jacksonville, FL 32259

TITLE D ☐ Change ☒ Addition
NAME Smith, Paul
STREET ADDRESS 11587 Gwynford Lane
CITY-ST-ZIP Jacksonville, FL 32223

TITLE D ☐ Change ☒ Addition
NAME Moore, Jim
STREET ADDRESS 177 Ivy Lakes
CITY-ST-ZIP Jacksonville, FL 32259

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

David J. Moore Treasurer

3/23/06

(904) 287-5795

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #