2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001928

FILED Apr 10, 2006 Secretary of State

Entity Name: CHRIST CENTERED COMMUNITY CHURCH, INC

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 177

ALACHUA, FL 32616

Current Mailing Address: New Mailing Address:

P.O. BOX 177 ALACHUA, FL 32616

FEI Number: 52-2447920 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERRY, BOYZIE M ELDER
2317 N.W. 176TH PLACE
HIGH SPRINGS, FL 32643
US

PERRY, BOYZIE M ELDER
22317 N.W. 176TH PLACE
HIGH SPRINGS, FL 32643
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: ELDER BOYZIE M. PERRY 04/10/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 PERRY, BOYZIE M ELDER
 Name:
 PERRY, BOYZIE M ELDER

 Address:
 4584 WILDERNESS CT
 Address:
 22317 NW 176TH PLACE

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:
 HIGH SPRINGS, FL 32643

Title: D () Delete Title: D (X) Change () Addition Name: MCCLELLON, AL Name: MCCLELLON, AL

 Address:
 P.O. BOX 1563
 Address:
 5956 SW 53RD ST.

 City-St-Zip:
 ALACHUA, FL 32616
 City-St-Zip:
 LAKE BUTLER, FL 32054

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MCCLELLON, SHERRON
 Name:
 MCCLELLON, SHERRON

 Address:
 P.O. BOX 1563
 Address:
 5956 SW 53RD ST.

 City-St-Zip:
 ALACHUA, FL 32616
 City-St-Zip:
 LAKE BUTLER, FL 32054

Title: D () Delete Title: () Change () Addition

 Name:
 PERRY, DESTINI C
 Name:

 Address:
 485 SW 6TH STREET
 Address:

 City-St-Zip:
 LAKE BUTLER, FL 32054
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 PERRY, JOSLYN S
 Name:

 Address:
 485 S.W. 6TH ST.
 Address:

 City-St-Zip:
 LAKE BUTLER, FL 32054
 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: ELDER BOYZIE M. PERRY D 04/10/2006

Electronic Signature of Signing Officer or Director

Date