2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001348

Entity Name: CORDOVA COMMUNITY CHURCH, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4301 BAYOU BLVD 1445 KINGS ROAD PENSACOLA, FL 32503 CANTONMENT, FL 32533 **Current Mailing Address: New Mailing Address:** 4301 BAYOU BLVD P.O. BOX 30065 PENSACOLA, FL 32503 PENSACOLA, FL 32503 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HALE, JIM HALE, JIM P.O.BOX 30065 4301 BAYOU BLVD. PENSACOLA, FL 32503 PENSACOLA, FL 32503 US 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: 04/28/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HALE, JIM Name: Name: 1445 KINGS RD. Address: Address: City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: Title: Title: () Delete () Change () Addition Name: RHODES, TIM Name: Address: 4475 WHISPER CT. Address: City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: Title: () Delete Title: () Change () Addition COOK, DAVID Name: Name: 5566 CHANTILLY CIRCLE Address: Address: City-St-Zip: MILTON, FL 32583 City-St-Zip: () Delete Title: Title: () Change () Addition Name: GRUBB, PAUL Name: 2712 ASHBURY LANE Address: Address: City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: Title: () Delete Title: () Change () Addition BRICKER, RANDY Name: Name: 6563 RAMBLER DR. Address: Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: (X) Delete Title: () Change () Addition QUEEN, RICHIE Name: Name: Address: 5400 CHARBAR DR. Address: PENSACOLA, FL 32526 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: JIM HALE D 04/28/2006