

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010348

FILED  
Mar 10, 2006  
Secretary of State

Entity Name: CHRIST CHURCH OF HOLLYWOOD, INC.

**Current Principal Place of Business:**

6019 BUCHANAN ST.  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

6019 BUCHANAN ST.  
HOLLYWOOD, FL 33024 US

**Current Mailing Address:**

6019 BUCHANAN ST.  
HOLLYWOOD, FL 33024

**New Mailing Address:**

6019 BUCHANAN ST.  
HOLLYWOOD, FL 33024 US

FEI Number: 20-3666872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ALESSI, DANIEL  
6019 BUCHANAN ST.  
HOLLYWOOD, FL 33024 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: ALESSI, DANIEL  
Address: 6019 BUCHANAN ST.  
City-St-Zip: HOLLYWOOD, FL 33024

Title: V ( ) Delete  
Name: EDMINSTON, JONATHAN D  
Address: 6019 BUCHANAN ST.  
City-St-Zip: HOLLYWOOD, FL 33024

Title: ST ( ) Delete  
Name: ALESSI, PATRICIA  
Address: 6019 BUCHANAN ST.  
City-St-Zip: HOLLYWOOD, FL 33024

**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:

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: ALESSI, PATRICIA

ST

03/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date