2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2005
Secretary of State

DOCUMENT# N05063

Entity Name: CYPRESS MEADOWS COMMUNITY CHURCH OF THE CHRISTIAN & MISSIONARY ALLIANCE, INC.

Current Principal Place of Business:

2180 MCMULLEN-BOOTH RD
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

2180 MCMULLEN-BOOTH RD
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 59-2624337 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POOLE, DOUGLAS
1117 ARCHERS BEND
SAFETY HARBOR, FL 34695 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:	SP	( ) Delete
Name:	POOLE, DOUGLAS D.,	
Address:	1117 ARCHERS BEND	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	BMD	( ) Delete
Name:	STEINBRUECK, PAUL	
Address:	3129 SWAN LN	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:	BMD	( ) Delete
Name:	LLEWELLYN, BUD	
Address:	25 TURTLE CREEK CIR	
City-St-Zip:	OLDMAR, FL 34677	
Title:	BMD	( ) Delete
Name:	CHAMBERLAIN, DONNA	
Address:	2687 SABAL SPRINGS CIR	
City-St-Zip:	CLEAREWATER, FL 33761	
Title:	BMD	( ) Delete
Name:	STEINBRUECK, PAUL	
Address:	6 HARBOR COVE STREET	
City-St-Zip:	SAFETY HARBOR, FL 34695	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:		
Title:	BMD	(X) Change ( ) Addition
Name:	WALTERS, TIM	
Address:	8546 TIDAL BAY LN	
City-St-Zip:	TAMPA, FL 33635	
Title:	BMD	( ) Change (X) Addition
Name:	KHAN, CHERYL	
Address:	4320 TREMBLAY WAY	
City-St-Zip:	PALM HARBOR, FL 34685	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL STEINBRUECK BMD 07/22/2005

Electronic Signature of Signing Officer or Director — Date