



**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 19, 2006 8:00 am**  
**Secretary of State**

01-19-2006 90076 022 \*\*\*\*61.25

<b>DOCUMENT # N06718</b>			
1. Entity Name <b>CHURCH OF THE RESURRECTION PARISH, INC.</b>			
Principal Place of Business <b>66 8TH STREET SHALIMAR, FL 32579 US</b>		Mailing Address <b>P.O. BOX 681 SHALIMAR, FL 32579 US</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
01142006		Chg-NP CR2E037 (11/05)	
4. FEJ Number <b>59-2714988</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$6.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>TURCZYNSKI, RAYMOND JR 229 N.W. CREWILLA DRIVE FORT WALTON BEACH, FL 32548</b>		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
		<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUSSIER, EDWARD L <input type="checkbox"/> Delete 382 GARDNER DRIVE FORT WALTON BEACH, FL 32548	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, DANIEL C <input type="checkbox"/> Delete 7249 SHEARWATER DRIVE NAVARRE, FL 32566	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOWD, CAROL D <input checked="" type="checkbox"/> Delete P.O. BOX 1243 SHALIMAR, FL 32579	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARDEN, WILLIAM D. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1 BAY COVE LANE SHALIMAR, FL 32579
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENASTON, NANCY <input checked="" type="checkbox"/> Delete 24 NEPTUNE DRIVE MARY ESTHER, FL 32569	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHEELOCK, LAURIN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5955 OAK HILL ROAD CRESTVIEW, FL 32536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TURCZYNSKI, RAYMOND JR <input type="checkbox"/> Delete 229 NW CREWILLA DR FORT WALTON BEACH, FL 32548	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TREACY, WILLIAM O <input type="checkbox"/> Delete 214 LAFITTE CRESCENT FORT WALTON BEACH, FL 32547	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 or other like empowered.			
<b>SIGNATURE:</b> 		<b>RAYMOND TURCZYNSKI, JR</b> 14 JAN 06 850-243-3649	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	