2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08738

Apr 07, 2006 Secretary of State

Entity Name: COMMUNITY ALLIANCE CHURCH OF SEMINOLE, INC.

Current Principal Place of Business: New Principal Place of Business: 4815 E. LAKE DRIVE WINTER SPRINGS, FL 32708 **Current Mailing Address: New Mailing Address:** 4815 E. LAKE DRIVE WINTER SPRINGS, FL 32708 FEI Number: 59-2688354 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: BOLLBACK, JONATHAN W 4815 E. LAKE DR. WINTER SPRINGS, FL 32708 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BOLLBACK, JONATHAN W Name: Name: 4815 E. LAKE DR. Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: DTD (X) Delete Title: () Change () Addition Name: MCGAHA, SUSAN Name: Address: 1443 MT. LAUREL DR. Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: () Delete Title: (X) Change () Addition CRABTREE, BECKY CHAMBERS, MARJORIE Name: Name: 4031 GILDER ROSE PL Address: Address: 546 ORANGE DR, UNIT 23 City-St-Zip: WINTER PARK, FL 32708 City-St-Zip: ALTAMONTE SPRINGS, FL 32701 () Delete Title: TD Title: TD (X) Change () Addition THOMPSON, KENTON FERRI, DANA Name: Name: 946 BIRD CAY CT APT 106 Address: Address: 1131 SADDLEHORN CIRCLE City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: WINTER SPRINGS, FL 32708

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: JONATHAN W BOLLBACK PD 04/07/2006