

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N15737	
1. Entity Name WILDWOOD CHURCH OF CHRIST, INC.	

Principal Place of Business 114 CLEVELAND AVE WILDWOOD FL 34785 US	Mailing Address 114 CLEVELAND AVE WILDWOOD FL 34785 US
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2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number 59-1542089	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent THORNTON, RANDALL N 2031 N. C-470 LAKE PANASOFFKEE FL 33538

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERTZ, HARRY J. 407 N WARFIELD AVE WILDWOOD FL 34785 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTR MCKAY, MICHEAL 13706 NE 13TH STREET OXFORD FL 34484 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLENN, JIMMY P. O. BOX 292 N/A OXFORD FL 34484 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAKE, CHARLES 723 PRADO DR LADY LAKE FL 32159 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD JONES, KEITH PO BOX 133 OXFORD FL 34484 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTA, ARSENIO 9443 E BEECH CIRCLE INVERNESS FL 34450 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition UN0000444992 03/07/06-80026-004 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.