2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20247

FILED Apr 28, 2006 Secretary of State

Entity Name: GULF COAST CHURCH OF CHRIST, INC. **Current Principal Place of Business: New Principal Place of Business:** 719 OLD CORRY FIELD RD. PENSACOLA, FL 32523 **Current Mailing Address: New Mailing Address:** P.O. BOX 18947 PENSACOLA, FL 32523 FEI Number: 59-2829292 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NICKS, NATHANIEL B 6889 FOXCHASE CIRCLE PENSACOLA, FL 32506 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: () Change () Addition () Delete BLUE, KERRY T Name: Name: 1301 N. OLD CORRY FIELD RD. L-13 Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WILLIE, RANDALL Name: Address: 1015 W. BOBE Address: City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: Title: () Delete Title: PD (X) Change () Addition NICKS, NATHANIEL B NICKS, NATHANIEL B Name: Name: 8132 CHAPPERAL ST Address: Address: 6889 FOXCHASE CIR. City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32506 US Title: **PCSD** () Delete Title: () Change () Addition Name: NICKS, NATHANIEL B Name: 6889 FOXCHASE CIR. Address: Address: City-St-Zip: PENSACOLA, FL 32506 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: NATHANIEL B. NICKS PCSD 04/28/2006