

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22951

FILED
Apr 13, 2005
Secretary of State

Entity Name: PALMETTO AVENUE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

1827 PALMETTO AVE
FORT MYERS, FL 33916 US

New Principal Place of Business:

Current Mailing Address:

3442 SOUTH STREET
FORT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 59-2518341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, GILBERT B
3442 SOUTH STREET
FT. MYERS, FL 33916 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: DMT () Delete
Name: MILLER, GILBERT B
Address: 3442 SOUTH STREET
City-St-Zip: FORT MYERS, FL 33916

Title: DT () Delete
Name: FLEMMING, MICHAEL
Address: 4636 NEW YORK DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: DTT () Delete
Name: GIVENS, VERNON
Address: 4976 SHERRY ST.
City-St-Zip: FORT MYERS, FL 33905

Title: DATT () Delete
Name: JENKINS, NATHANIEL
Address: 15570 PINE RIDGE ROAD
City-St-Zip: FORT MYERS, FL 33908

Title: DT () Delete
Name: PHILLIPS, HENRY
Address: 2422 DAVIS STREET
City-St-Zip: FT MYERS, FL 33916

Title: DT () Delete
Name: GASKIN, TERRY
Address: 3976 CORNING CT
City-St-Zip: FT MYERS, FL 33905

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VERNON L GIVENS

TRUS

04/13/2005

Electronic Signature of Signing Officer or Director

Date