2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N23663

1. Entity Name
THE BODY OF CHRIST JESUS CHURCH, INC.

Principal Place of Business	Mailing Address
106 HARBOR STREET P.O.BOX 1198 PORT ST. JOE, FL 32456	106 HARBOR STREET P.O.BOX 1198 PORT ST. JOE, FL 32456

DO NOT WRITE IN THIS SPACE

04032006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2920131
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SWANSTON, WILHELMINA
108 HARBOR ST
PORT ST. JOE, FL 32456

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SWANSTON, WILHELMINA
STREET ADDRESS	108 HARBOR ST.
CITY-ST-ZIP	PORT ST. JOE, FL
TITLE	D
NAME	FENNELL, EVA MAE
STREET ADDRESS	302 AVENUE ED
CITY-ST-ZIP	PORT ST. JOE, FL
TITLE	D
NAME	NICKSON, DONALD
STREET ADDRESS	134 AVENUE F
CITY-ST-ZIP	PORT ST. JOE, FL
TITLE	TR
NAME	FENNELL, MICHAEL
STREET ADDRESS	404 BATTLE STREET
CITY-ST-ZIP	PORT SAINT JOE, FL 32456
TITLE	T
NAME	MARTIN, VERNIE R
STREET ADDRESS	110 ROYAL ST
CITY-ST-ZIP	PORT ST JOE, FL 32456
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000504952
04/26/06-80097-009 61.25

U00000504952
04/26/06-80097-010 8.75

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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 all other like empowered.

SIGNATURE: Wilhelmina Swanston for Wilhelmina Swanston 4-10-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

850 229-8814
Daytime Phone #