


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # N30141 1. Entity Name 5TH STREET CHURCH OF CHRIST, INC. CRYSTAL RIVER, FLORIDA	
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Principal Place of Business 304 N E 5TH STREET CRYSTAL RIVER, FL 34429	Mailing Address PO BOX 477 CRYSTAL RIVER, FL 32623-0477
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01142006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2848859	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BUCKINGHAM, BUFORD L 4100 W. HORSESHOE DR BEVERLY HILLS, FL 34465
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**DO NOT WRITE
IN THIS SPACE**

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 _____

**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 NAME STREET ADDRESS CITY - ST - ZIP	D SAVAGE, HUBERT B JR 4255 N. CITRUS AVE CRYSTAL RIVER, FL 34428
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BUCKINGHAM, BUFORD L 4100 W HORSESHOE DR BEVERLY HILLS, FL 34465
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SINGLETON, FLOYD R 901 E WARREN STREET PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD WALKER, MICKEY M 2228 PIEDMONT STREET ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1100000393149
01/25/06-80009-017 61.25

**DO NOT WRITE
IN THIS SPACE**

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: Buford L. Buckingham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 1/17/06 Daytime Phone # _____