

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2005
Secretary of State**

DOCUMENT# N38631

Entity Name: CHRISTIAN COUNSELING CENTER OF BAY COUNTY, INC.

Current Principal Place of Business:

32 W 6TH ST
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

32 W 6TH ST
PANAMA CITY, FL 32401 US

New Mailing Address:

FEI Number: 59-3055905 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUTCHINSON, EDWARD A., JR.
221 MCKENZIE AVENUE
PANAMA CITY, FL 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: VSD () Delete
Name: BUCK, TIMOTHY
Address: 818 GRACE AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: COCHRAN, SUE
Address: 3221 COUNTRY CLUB DR
City-St-Zip: LYNN HAVEN, FL 32444

Title: PD () Delete
Name: PRITCHARD, NANCY
Address: 102 HARRISON PLACE
City-St-Zip: PANAMA CITY, FL 32405

Title: MD () Delete
Name: EUBANKS, PAUL H
Address: 1219 MARIE ANN BLVD
City-St-Zip: PANAMA CITY, FL 32401

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:

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: TIMOTHY BUCK

VSD

04/25/2005

Electronic Signature of Signing Officer or Director

Date