2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39658

FILED Apr 01, 2006 Secretary of State

Entity Name: APOSTOLIC CHRISTIAN CHURCH OF NORTH PORT, INC.

| Current Pi | incipal Place | of Business: | New Princ | New Principal Place of Business: | | | |
|---|--|------------------------------------|---|---|----------------------------|-------------|--|
| 8064 PRIC PO BOX 75 NORTH PO | | 7 | | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | | |
| 3064 PRIC PO BOX 75 NORTH PO | | 7 | | | | | |
| FEI Number: | 59-2155097 | FEI Number Applied For () | FEI Number Not Appl | icable () | Certificate of Status Desi | red () | |
| Name and | Address of C | urrent Registered Agent: | Name and | Address of Ne | w Registered Agent | : | |
| | ÉL DR A, FL 34240 | US | | | | | |
| | named entity s of Florida. | ubmits this statement for the pur | pose of changing i | ts registered offi | ice or registered agen | t, or both, | |
| SIGNATUF | RE: | | | | | | |
| | Electron | ic Signature of Registered Agent | | | Date | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | PD () WEINHARDT, K 2392 VANCE TE PORT CHARLO | RR. | Title: Name: Address: City-St-Zip: | () C | Change () Addition | | |
| Fitle: Name: Address: City-St-Zip: | PT () POHANKA, PER 1642 JEWEL DI SARASOTA, FL | ₹ | Title: Name: Address: City-St-Zip: | ()(| Change () Addition | | |
| Title: Name: Address: City-St-Zip: | S () SPEVAK, GRAC 7490 PRICE BL NORTH PORT, I | VD | Title: Name: Address: City-St-Zip: | S (X) C SPEVAK, GRACE 1691 MOSSY OA NORTH PORT, FI | K DR. | | |
| Title: Name: Address: City-St-Zip: | PD () HERTIG, MAX 3200 BAY RIDG PORT CHARLO | | Title: Name: Address: City-St-Zip: | ()(| Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D () GETZ, PAUL 13961 LONG LA PORT CHARLO | | Title: Name: Address: City-St-Zip: | ()(| Change () Addition | | |
| Fitle: Name: Address: City-St-Zip: | BOROS, DANIE 7 GENOA DR. | Delete L L SPRINGS, FL 34287 | Title: Name: Address: City-St-Zip: | ()(| Change () Addition | | |
| l boroby oo | | armation cumplied with this filing | | | | h 440 | |

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: PERRY POHANKA PT 04/01/2006