2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42049

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

TD

1645 6TH AVENUE NORTH

JACKSONVILLE, FL 32250

JACKSONVILLE, FL 32208

MCCANTS, SABRINA

2611 LOWES PL

() Delete

Apr 27, 2006 Secretary of State

Entity Name: DEEPER WATERS CHRISTIAN CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 11089 LEM TURNER RD JACKSONVILLE, FL 32218 US **Current Mailing Address: New Mailing Address:** P.O. BOX 40692 JACKSONVILLE, FL 32203 US FEI Number: 59-3025601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOUGLAS, JAMES 6370 TOYÓTA DR JACKSONVILLE, FL 32244 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROZIERS, HERBERT A Name: Name: 1235 TURTLE CREEK DR. S. Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: Title: VD () Delete Title: (X) Change () Addition Name: ROZIERS, KAREN W Name: ROZIERS, KAREN W Address: 1235 TURTLE CREEK DR. S. Address: 1235 TURTLE CREEK DR. S. City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218 Title: () Delete Title: (X) Change () Addition WHITE, DANIEL B MILLER, WILLIAM J.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

10621 NORTRH KENDALL DR. #113

(X) Change () Addition

MIAMI, FL 33176

MCCANTS, SABRINA

1816 WEST 28TH ST.

JACKSONVILLE, FL 32209

SD

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: HERBERT A.ROZIERS PD 04/27/2006