

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45026

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: FLORIDA CHRISTIAN CONFERENCE, INC.

**Current Principal Place of Business:**

1714 S.E. 36TH AVE  
OCALA, FL 34471 US

**New Principal Place of Business:**

1500 EAST VINE STREET  
KISSIMMEE, FL 34744 US

**Current Mailing Address:**

1714 S.E. 36TH AVE  
OCALA, FL 34471 US

**New Mailing Address:**

1500 EAST VINE STREET  
KISSIMMEE, FL 34744 US

FEI Number: 59-3097488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ESTRELLA, JAMES A  
1500 EAST VINE STREET  
KISSIMMEE, FL 34744 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: P/S ( ) Delete  
Name: ESTRELLA, JAMES A  
Address: 1500 EAST VINE STREET  
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D ( ) Delete  
Name: HODGES, MARK  
Address: 631 DILLARD STREET  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D ( ) Delete  
Name: ETHEREDGE, SIDNEY  
Address: 1714 S.E. 36TH AVE  
City-St-Zip: OCALA, FL 34471 US

**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:

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: JAMES A. ESTRELLA

P/S

01/05/2006

Electronic Signature of Signing Officer or Director

Date