
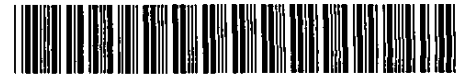


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2007 8:00 am
Secretary of State

03-01-2007 90022 015 ****70.00

DOCUMENT # N92000000598 1. Entity Name FIRST COMMUNITY CONGREGATIONAL UNITED CHURCH OF CHRIST, INC.			
Principal Place of Business 200 E LEELAND HEIGHTS BLVD. LEHIGH ACRES FL 33936		Mailing Address P.O. BOX 657 LEHIGH ACRES FL 33970	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number 59-1969598		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMPSON, DOUGLAS H 820 JAGUAR BLVD LEHIGH ACRES FL 33936		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
		FL Zip Code	
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 <i>[Signature]</i>		- CHAIRMAN OF TRUSTEES	
		DATE 2/23/07	
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P LOVE, BETH	<input checked="" type="checkbox"/> Delete	
STREET ADDRESS	53 HAMLIN CT		
CITY-ST-ZIP	LEHIGH ACRES FL 33936		
TITLE	D THOMPSON, DOUGLAS H	<input type="checkbox"/> Delete	
STREET ADDRESS	820 JAGUAR BLVD		
CITY-ST-ZIP	LEHIGH ACRES FL 33936		
TITLE	S COYNE, ROBERT	<input checked="" type="checkbox"/> Delete	
STREET ADDRESS	1505 MARKDALE ST. E		
CITY-ST-ZIP	LEHIGH ACRES FL 33936		
TITLE	T NOTTLING, BETTY	<input type="checkbox"/> Delete	
STREET ADDRESS	833 POTER STREET E		
CITY-ST-ZIP	LEHIGH ACRES FL 33936		
TITLE	D SOLIDAY, EUGENE	<input type="checkbox"/> Delete	
STREET ADDRESS	2 E. GREENS BLVD.		
CITY-ST-ZIP	LEHIGH ACRES FL 33972		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	P M. Ada Thompson	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	820 Jaguar Blvd		
CITY-ST-ZIP	Lehigh Acres, FL 33936		
TITLE	D Doug Thompson	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	820 Jaguar Blvd		
CITY-ST-ZIP	Lehigh Acres, FL 33936		
TITLE	S Kenneth Valleskey	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1522 Canal Street		
CITY-ST-ZIP	Lehigh Acres, FL 33972		
TITLE	T Betty Nottling	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	833 Porter St E		
CITY-ST-ZIP	Lehigh Acres, FL 33936		
TITLE	D Eugen Soliday	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	2 E. Greens Blvd		
CITY-ST-ZIP	Lehigh Acres, FL 33972		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <i>[Signature]</i> Betty Nottling		2/22/07 (239)369-1615	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			



1st MOORE CR2E037 (10/06)