

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005291

FILED  
Jan 10, 2005  
Secretary of State

Entity Name: WARRIORS FOR CHRIST, INC.

## Current Principal Place of Business:

102 NE 10 AVE.  
B-1-7  
GAINESVILLE, FL 32601

## New Principal Place of Business:

102 NE 10 AVE.  
S-14  
GAINESVILLE, FL 32601

## Current Mailing Address:

7500 N.E. 24 LOOP  
HIGH SPRINGS, FL 32643

## New Mailing Address:

FEI Number: 63-0484828      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DEANE, JOHN T  
7500 N.E. 24 LOOP  
HIGH SPRINGS, FL 32643      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: PTTD ( ) Delete  
Name: DEANE, JOHN T  
Address: 7500 NE 24 LOOP  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D ( ) Delete  
Name: DEANE, MONTY EMIL  
Address: 720 SW 111 AVE S-304  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VTSD ( ) Delete  
Name: MCCLELLAN, JIM  
Address: 2919 NW 42 TERR  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: CRIPE, MICHELE  
Address: 5509 NW 27TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32653

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VTSD (X) Change ( ) Addition  
Name: BULATEWICZ, TONY  
Address: 3501 SW ARCHER RD S-100  
City-St-Zip: GAINESVILLE, FL 32608

Title: DIR (X) Change ( ) Addition  
Name: MCCANN, MICHAEL  
Address: 2511 NE 3 PLACE  
City-St-Zip: GAINESVILLE, FL 32641

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: JOHN T DEANE

PTTD

01/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date