

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 07, 2006  
Secretary of State**

DOCUMENT# N94000003772

Entity Name: CORNERSTONE CHRISTIAN CENTER OF CLEARWATER, INC.

**Current Principal Place of Business:**

317 MILWAUKEE AVE.  
DUNEDIN, FL 34698 US

**New Principal Place of Business:**

**Current Mailing Address:**

317 MILWAUKEE AVE.  
DUNEDIN, FL 34698 US

**New Mailing Address:**

FEI Number: 59-3260463      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WYNS, STEPHEN  
317 MILWAKUKEE AVE.  
DUNEDIN, FL 34689 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: D ( ) Delete  
Name: WYNS, STEPHEN P  
Address: 203 DUNBRIDGE DR.  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: WYNS, MAUREEN  
Address: 203 DUNBRIDGE DR.  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: EMERY, JOHN  
Address: 2033 DAWN DR  
City-St-Zip: CLEARWATER, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: EMERY, JOHN  
Address: 2033 DAWN DR  
City-St-Zip: CLEARWATER, FL 33763

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: STEPHEN P. WYNS

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

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02/07/2006

\_\_\_\_\_ Date