

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90051 009 ****70.00

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1. Entity Name

COMMUNITY CHURCH OF ALVA INC.



Principal Place of Business

23060 RAILROAD AVENUE
ALVA FL 33920

Mailing Address

23170 AVE B
ALVA FL 33920

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0714321

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHRISTMAS, WILLIE
23201 AVENUE B
ALVA FL 33920

7. Name and Address of New Registered Agent

Name

Willie Christmas

Street Address (P.O. Box Number is Not Acceptable)

23170 AVE B

ALVA FLA 33920

City

FL

Zip Code

33920

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

Willie Christmas

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DT ☐ Delete
NAME WILLIAMS, GEORGIE
STREET ADDRESS 23070 RAILROAD AVE
CITY-ST-ZIP ALVA FL 33920

TITLE DV ☐ Delete
NAME REDMON, JOSEPH
STREET ADDRESS 23020 AVE B
CITY-ST-ZIP ALVA FL 33920

TITLE DTR ☐ Delete
NAME BAPTISTE, PATRICIA
STREET ADDRESS 23190 AVE A
CITY-ST-ZIP ALVA FL 33920

TITLE P ☐ Delete
NAME CHRISTMAS, WILLIE
STREET ADDRESS 23170 AVE B
CITY-ST-ZIP ALVA FL 33920-4105

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Willie Christmas

2806

239-728 3108