2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000005002

1. Entity Name
THE CHURCH OF CHRIST AT BEVERLY SHORES, INC.

Principal Place of Business	Mailing Address
1318 WEST GRIFFIN ROAD LEESBURG, FL 34748	1318 WEST GRIFFIN ROAD LEESBURG, FL 34748

04112006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
59-1996589
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DILLINGER, AUSTIN C JR.
7206 PALM AVENUE
LEESBURG, FL 34788

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	YOPP, JAMES D
STREET ADDRESS	35225 QUEENS WAY
CITY-ST-ZIP	FRUITLAND PARK, FL 34731
TITLE	TD
NAME	BRYANT, GREGORY O
STREET ADDRESS	2024 ELMHURST LANE
CITY-ST-ZIP	MASCOTTE, FL 34753
TITLE	SD
NAME	DILLINGER, AUSTIN C JR.
STREET ADDRESS	7206 PALM AVENUE
CITY-ST-ZIP	LEESBURG, FL 34788
TITLE	VPD
NAME	IRWIN, ALAN
STREET ADDRESS	36765 SHADOW HILL DR
CITY-ST-ZIP	FRUITLAND PARK, FL 34731
TITLE	PE
NAME	CLARK, GEORGE J SR.
STREET ADDRESS	1021 MELLATHON CIRCLE
CITY-ST-ZIP	LEESBURG, FL 34748
TITLE	D
NAME	TODD, PATRICK
STREET ADDRESS	5209 ALBERT RD
CITY-ST-ZIP	FRUITLAND PARK, FL 34731

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05/02/06-80014-010 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Austin C. Dillinger 4/12/06 352-728-0523
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #