2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # N98000007002

1. Entity Name
FIRST COMMUNITY CHRISTIAN CHURCH, INC.

Principal Place of Business	Mailing Address
3621 E. GENESSE ST. TAMPA, FL 33610-7026	3621 E. GENESSE ST. TAMPA, FL 33610-7026

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02142006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3576423

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WRIGHT, JOHNNY
5313 ARCHSTONE DR
APT #206
TAMPA, FL 33634

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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	P
NAME	WRIGHT, JOHNNY L
STREET ADDRESS	5313 ARCHSTONE DR #206
CITY-ST-ZIP	TAMPA, FL 33634
TITLE	T
NAME	ALLUMS, DOROTHY
STREET ADDRESS	1005 TURKEY TROT PLACE
CITY-ST-ZIP	TAMPA, FL 33637
TITLE	D
NAME	NELSON, MELVIN
STREET ADDRESS	42069 HANNA AVE
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	A
NAME	MERCER, DEBBIE
STREET ADDRESS	1231 BLUFIELD AVENUE
CITY-ST-ZIP	BRANDON, FL 33511
TITLE	D
NAME	PERDUE, DON
STREET ADDRESS	6219 FVENEZIA PLACE
CITY-ST-ZIP	RIVERVIEW, FL 33569
TITLE	D
NAME	WASHINGTON, DARRYL
STREET ADDRESS	509 LISA LANE
CITY-ST-ZIP	BRANDON, FL 33511

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05/04/06-80001-008 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: Debbie Mercer 4/19/06 (813)274-5871
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #