

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001410

FILED
Feb 21, 2006
Secretary of State

Entity Name: GOD'S POCKET CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1232 N. TAMIAMI TRL
#7
N. FORT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

1232 N. TAMIAMI TRL
#7
N. FORT MYERS, FL 33903

New Mailing Address:

FEI Number: 91-1825478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BEAN, ROBERT E REV.
1835 GRACE AV
FORT MYERS, FL 33901 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: PCD () Delete
Name: BEAN, ROBERT E
Address: 64 OAK ST
City-St-Zip: FORT MYERS, FL 33903

Title: VTD () Delete
Name: BEAN, CHRISTINA
Address: 64 OAK ST
City-St-Zip: FORT MYERS, FL 33903

Title: VSD () Delete
Name: RIZZO, VINCE
Address: 4962 MARS ST
City-St-Zip: FORT MYERS, FL 33905

Title: D () Delete
Name: PEYTON, CAROL
Address: 20707 MYSTIC WAY
City-St-Zip: FT MYERS, FL 33917 US

Title: D () Delete
Name: PEYTON, GENE
Address: 20707 MYSTIC WAY
City-St-Zip: FT MYERS, FL 33917 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: BEAN, ROBERT E
Address: 1835 GRACE AV
City-St-Zip: FORT MYERS, FL 33901

Title: VTD (X) Change () Addition
Name: BEAN, CHRISTINA
Address: 1835 GRACE AV
City-St-Zip: FORT MYERS, FL 33901

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

Title: D (X) Change () Addition
Name: PEYTON, CAROL
Address: 11625 SW DALLAS DR
City-St-Zip: LAKE SUZY, FL 34269 US

Title: D (X) Change () Addition
Name: PEYTON, GENE
Address: 11625 SW DALLAS DR
City-St-Zip: LAKE SUZY, FL 34269 US

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: ROBERT E BEAN

PRES

02/21/2006

Electronic Signature of Signing Officer or Director

Date