

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002446

FILED  
Apr 04, 2005  
Secretary of State

**Entity Name:** FIRST CHRISTIAN CHURCH OF SUN CITY CENTER FLORIDA, INC.

**Current Principal Place of Business:**

1107 JASMINE CREEK CT  
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

1851 RICKENBACKER DR  
SUN CITY CENTER, FL 33573

**Current Mailing Address:**

1107 JASMINE CREEK CT  
SUN CITY CENTER, FL 33573

**New Mailing Address:**

1814 FT DUQUESNA DR  
SUN CITY CENTER, FL 33573

**FEI Number:** 59-3569329

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUNNINGHAM, TIMOTHY  
1107 JASMINE CREEK CT  
SUN CITY CENTER, FL 33573 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: CUNNINGHAM, TIMOTHY  
Address: 1107 JASMINE CREEK CT  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: S ( ) Delete  
Name: SNYDER, K. DARRELL  
Address: 201 LINGER LANE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D ( ) Delete  
Name: WOODS, JOHNNY E  
Address: 821 FOX HILLS DR  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

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

Title: T ( ) Change (X) Addition  
Name: JONES, BRENDA S  
Address: 1814 FT DUQUESNA DR  
City-St-Zip: SUN CITY CENTER, FL 33573

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRENDA SUE JONES

T

04/04/2005

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

\_\_\_\_\_  
Date