## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000002446

FILED Feb 01, 2006 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

1851 RICKENBACKER DR SUN CITY CENTER, FL 33573

Current Mailing Address: 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: Name and Address of New Registered Agent:

CUNNINGHAM, TIMOTHY
1107 JASMINE CREEK CT
JONES, VERNON
1814 FT DUQUESNA DR

SUN CITY CENTER, FL 33573 US SUN CITY CENTER, FL 33573 US

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: VERNON JONES 02/01/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: CUNNINGHAM, TIMOTHY Name: JONES, VERNON

Address: 1107 JASMINE CREEK CT Address: 1814 FT DUQUESNA DR
City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip: SUN CITY CENTER, FL 33573

Title: S ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 SNYDER, K. DARRELL
 Name:
 SNYDER, K. DARRELL

 Address:
 201 LINGER LANE
 201 LINGER LANE

 City-St-Zip:
 SUN CITY CENTER, FL 33573
 City-St-Zip:
 SUN CITY CENTER, FL 33573

Title: D ( ) Delete Title: ( ) Change ( ) Addition

Name: WOODS, JOHNNY E Name:
Address: 821 FOX HILLS DR Address:

Address: 821 FOX HILLS DR Address:
City-St-Zip: SUN CITY CENTER, FL 33573 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JONES, BRENDA S
 Name:

 Address:
 1814 FT DUQUESNA DR
 Address:

 City-St-Zip:
 SUN CITY CENTER, FL 33573
 City-St-Zip:

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: BRENDA JONES T 02/01/2006