2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 8:00 am Secretary of State

DOCUMENT # N9900004761 1. Entity Name OAK TREE COMMUNITY CHURCH, INC.					006 90182 036 ****61	1.25	
Principal Place of Business Mailing Address 712 ANDERSON ST PO BOX 552 MASCOTTE, FL 34753 GROVELAND, FL			j	្ត មូល្ បប ម			
2. Principal Place of Business 3. Ma 2.00 W. BIOAD ST-		3. Mailing Address	. Mailing Address				
Suite, Apt. #, etc. St		Suite, Apt. #, etc.			CR2E037 (11/05)		
City & State G-Novelano FL Cit		City & State	City & State			olied For Applicable	
^{Zip} 34	1736 Country A	Zip	Country	5. Certificate of Status Desi	red \$8.75 Addi Fee Required		
	6. Name and Address of Current F	Registered Agent		7. Name and Address of N	lew Registered Agent		
THATA			Name T	tomPSON, BONG	Ce E		
THOMPSON, BRUCE E 9601 S HWY 33 GROVELAND, FL 34736				Street Address (P.O. Box Number is Not Acceptable)			
			Street Address				
			77	19 FRONTIER	DR		
			City	1 / 1 / A	FL Zip Code	200	
		···	<u> </u>	4 CANA		197	
	named entity submits this statement for ions of registered agent.	the pulpose of changing its r	egistered onice or regist	ered agent, or both, in the State	oi rionga. 1 am tamiliar with, a	ало ассері	
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signature requir	ed when remetating)	DATE		
Filing Fee is \$61.25 9 Due by May 1, 2006				•		i	
		9. Election Cam Trust Fund Co		\$5.00 May Be Added to Fees	Make check payable to Florida Department of Sta		
10.	Due by May 1, 2006 OFFICERS AND DIR	Trust Fund Co	ontribution.		Florida Department of Sta	ate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2006	Trust Fund Co	ontribution.	Added to Fees ADDITIONS/CHANGES TO OF	Florida Department of Sta FICERS AND DIRECTORS IN	ate	
TITLE NAME STREET ADDRESS	OFFICERS AND DIRI PD THOMPSON, BRUCE E PO BOX 368	Trust Fund Co	TITLE PD NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANGES TO OF THOMPSON BRUG 7719 FRONTIER YOLAHA FO BEEBE, BETT	Florida Department of Star FICERS AND DIRECTORS IN EXAMPLE 1 Change Change	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006 OFFICERS AND DIRI PD THOMPSON, BRUCE E PO BOX 368 GROVELAND, FL 34736 T CALAHAN, SABRINA	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees ADDITIONS/CHANGES TO OF THOMPSON BRUG 719 FRONTIER YALAHA FO	Florida Department of Star FICERS AND DIRECTORS IN EXAMPLE 1 Change Change	10 Addition	
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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 act attachmen with an address, with all other like empowered.

SIGNATURE: SCHATURE NO TYPEDISK PROVIDED NAME OF SIGNATURE OF DISCHOOL OF PROVIDER OF DIRECTOR

352-636-6279

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