

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006900

FILED  
Jul 14, 2005  
Secretary of State

**Entity Name:** WEST SHORE COMMUNITY CHURCH, INC.

**Current Principal Place of Business:**

12408 SW SHERI AVE.  
LAKE SUZY, FL 34269

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 512823  
PUNTA GORDA, FL 339512823

**New Mailing Address:**

**FEI Number:** 65-0967318      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

ALLEN, GUY  
310 N.W. ORANGE DR.  
PORT CHARLOTTE, FL 33952      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: ALLEN, GUY  
Address: 310 N.W. ORANGE DR.  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D      ( ) Delete  
Name: ALLEN, DARCIE  
Address: 310 N.W. ORANGE DR.  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D      ( ) Delete  
Name: BELVITCH, PAUL  
Address: 5010 ADMINISTRATION ST.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D      ( ) Delete  
Name: BELVITCH, DEBRA L  
Address: 5010 ADMINISTRATION ST.  
City-St-Zip: PORT CHARLOTTE, FL 33948

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

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: GUY ALLEN

D

07/14/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date