

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29258

**Entity Name:** CHRISTIANS CONCERNED FOR THE COMMUNITY, INC.**Current Principal Place of Business:**1903 NW 35 AVENUE  
GAINESVILLE, FL 32605**Current Mailing Address:**P.O. BOX 358173  
GAINESVILLE, FL 32635 US**FEI Number: 59-2927098****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CLOVER, DAN  
1903 NW 35 AVENUE  
GAINESVILLE, FL 32605 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: DAN CLOVER****09/14/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	MEMBER
Name	JAROCK, MARSHALL
Address	4626 NW 8TH AVE
City-State-Zip:	GAINESVILLE FL 32605

Title	ASST. TREASURER
Name	SZYMANSKI, MARK
Address	1903 NW 35 AVENUE
City-State-Zip:	GAINESVILLE FL 32605

Title	MEMBER
Name	DILLON, DONNY
Address	4626 NW 8TH AVE
City-State-Zip:	GAINESVILLE FL 32605

Title	DIRECTOR
Name	CLOVER, DAN
Address	P.O. BOX 358173
City-State-Zip:	GAINESVILLE FL 32635

Title	MEMBER, SECRETARY
Name	BALTRUCKI, KAY
Address	P.O. BOX 358173
City-State-Zip:	GAINESVILLE FL 32635

Title	MEMBER
Name	BENTON, JOHN
Address	11200 NW 39TH AVE
City-State-Zip:	GAINESVILLE FL 32606

*I hereby 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 all other like empowered.*

**SIGNATURE: DAN CLOVER****DIRECTOR****09/14/2022**

Electronic Signature of Signing Officer/Director Detail

Date