

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702501

Entity Name: MERIDIAN WOODS CHURCH OF CHRIST, INC.

FILED
Jun 03, 2004
Secretary of State

Current Principal Place of Business:

2870 NORTH MERIDIAN ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

2870 NORTH MERIDIAN ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-1504018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, W. W.
408 SOUTH RIDE
TALLAHASSEE, FL 32303 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: DT () Delete
Name: DIXON, LYNN,
Address: 2928 QUIAL RISE CT
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: FLETCHER, THOMAS L.,
Address: 3251 SHAMROCK EAST
City-St-Zip: TALLAHASSEE, FL 00000,

Title: D () Delete
Name: CAMPS, JOSEPH L.
Address: 3800 BOBINBROOK CIR
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: COCHRANE, ALAN
Address: 7015 SPENCER DR
City-St-Zip: TALLAHASSEE, FL

Title: S () Delete
Name: SINGLETON, MELINDA
Address: 2241 FOSTER DR.
City-St-Zip: TALLAHASSEE, FL

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: MELINDA SINGLETON

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06/03/2004

Electronic Signature of Signing Officer or Director

Date