2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# 703594

Entity Name: UNITARIAN UNIVERSALIST CONGREGATION OF COCOA, INC.

Current Principal Place of Business:

1261 RANGE RD
PO BOX 669
COCOA, FL 329237669

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 669
COCOA, FL 329230669 US

New Mailing Address:

FEI Number: 59-6591800 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, DAVID W
4525 ABBOTT AVENUE
TITUSVILLE, FL 32780

Name and Address of New Registered Agent:

CUMMINS, PAUL J
1710 YATES DRIVE
MERRITT ISLAND, FL 32952

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: PAUL J. CUMMINS 04/27/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: BISHOP, DIANE
Address: 1085 PINE ISLAND ROAD
City-St-Zip: MERRITT ISLAND, FL 329536602

Title: PD ( ) Delete
Name: JOHNSON, MICHAEL
Address: 384 NORWOOD AVENUE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VPD ( ) Delete
Name: BRADY, LEE
Address: 6630 AREQUIPPA ROAD
City-St-Zip: COCOA, FL 32927

Title: SD (X) Delete
Name: DOUGLAS, ROBYN L
Address: 6290 JANINA ROAD
City-St-Zip: COCOA, FL 32927

Title: TD (X) Delete
Name: STEWART, DAVID W
Address: 4525 ABBOTT AVE
City-St-Zip: TITUSVILLE, FL 32780

Title: TRD (X) Delete
Name: BRADY, MICHAEL J
Address: 663 AREQUIPPA ROAD
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ALBERT, DAVIES
Address: 784 SILKWOOD CT
City-St-Zip: LAKE MARY, FL 32746

Title: SD (X) Change ( ) Addition
Name: STEWART, DAVID
Address: 4525 ABBOTT DRIVE
City-St-Zip: TITUSVILLE, FL 32905

Title: TR (X) Change ( ) Addition
Name: CUMMINS, PAUL
Address: 1710 YATES DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

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: PAUL J. CUMMINS TR 04/27/2004
Electronic Signature of Signing Officer or Director — Date