

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

APPROVED AND FILED
8/23/2004 90022-034 \$61.50-\$61.50

DOCUMENT # 706154
1. Entity Name
FIRST CHRISTIAN CHURCH (DISCIPLES OF CHRIST), INC., OF LEHIGH ACRES, FLORIDA



DEC -7 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2803 LEE BLVD.
LEHIGH ACRES, FL 33971 US

Mailing Address
P.O. BOX 427
LEHIGH ACRES, FL 33970-0427

REINSTATEMENT 04



08042004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
59-1711730

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GARRETT, NANCY L
217 ROOSEVELT AVE.
LEHIGH ACRES, FL 33972

7. Name and Address of New Registered Agent
Name: A.B. REYNOLDS JR
Street Address (P.O. Box Number is Not Acceptable):
801 W. LEE LAND HOTS BLVD.
City: LEHIGH ACRES FL FL Zip Code: 33936

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE: A.B. Reynolds Jr (NOTE: Registered Agent signature required when reinstating) DATE: 11-2-04

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|----------------------------|--|--|--|
| TITLE: P | WEISER, NANCY 108 IDAHO LEHIGH ACRES, FL 33936 | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | 000043300230 12/03/04--01026--008 **175.00 |
| TITLE: VD | MARIK, WALTER 10438 LAKEPORT CT LEHIGH ACRES, FL 33936 | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: S | MARIK, JANET 10438 LAKEPORT CT LEHIGH ACRES, FL 33936 | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: TD | GARRETT, NANCY L 217 ROOSEVELT AVE. LEHIGH ACRES, FL 33972 | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | A.B. REYNOLDS JR 801 W. LEE LAND HOTS BLVD LEHIGH ACRES FL 33936 |
| TITLE: T | BUTLER, MARK 210 N MAPLE AVE LEHIGH ACRES, FL 33972 | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: TR | ALSIP, CHESTER 118 JEFFERSON AVE LEHIGH ACRES, FL 33972 | TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 an attachment with an address, with all other like empowered.

SIGNATURE: Nancy K Weiser 8/17/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #