


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 08:00 AM
Secretary of State

DOCUMENT # 710370 1. Entity Name FOREST HILLS BAPTIST CHURCH, INC.	
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Principal Place of Business 2625 SOUTH ST. TITUSVILLE, FL 32780	Mailing Address 2625 SOUTH ST. TITUSVILLE, FL 32780
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01082004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2469406	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DARGIE, ROBERT JR. 2615 SOUTH ST. TITUSVILLE, FL 32780
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DARGIE, ROBERT JR. 2615 SOUTH ST. TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOUSER, GORDON G 5750 BROAD ACRES MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, MICHAEL 3435 HERON LN. TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILLIS, JAMES 625 KAREN DR. TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLEMON, WILLIAM F. 3845 SUMMER TERRACE TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIORDANO, JACK 4345 BEST AVENUE TITUSVILLE, FL

000000002486
01/13/04-80016-001 70.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-04

Date

321-268-3727

Daytime Phone #