# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Mar 12, 2004 8:00 am**
**Secretary of State**
03-12-2004 90012 047 ****61.25

DOCUMENT # 741235

1. Entity Name

COMMUNITY CONGREGATIONAL CHRISTIAN CHURCH, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 9220 N CITRUS SPRINGS BLVD.<br>CITRUS SPRINGS FL 34433<br>US | 9220 N CITRUS SPRINGS BLVD.<br>CITRUS SPRINGS FL 34433<br>US |

MOORE CR2E037 (11/03)

| 2. Principal Place of Business | | 3. Mailing Address | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. FEI Number 59-1795637 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

SCOTT, STEVEN M.
2510 W DOLPHIN ST.
CITRUS SPRINGS FL 34434

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS $61.25**
**Due By May 1, 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 / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>COX, KENNETH<br>2372 W SNOWY EGRET PL.<br>DUNNELLON FL 34434 | ☒ Delete | TITLE D<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | WILLIAM H. BROWNE<br>4615 W. CUSTER DR<br>BEVERLY HILLS, FL 34465 ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>FARRIS, DEWAIN<br>2272 W HAMLET PL<br>CITRUS SPRINGS FL 34433 | ☒ Delete | TITLE D<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | CRAIG R. BROTHERTON<br>7854 N. GOLFVIEW DR<br>CITRUS SPRINGS, FL. 34434 ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SCOTT, STEVEN M.<br>2510 W. DOLPHIN DR.<br>CITRUS SPRINGS FL 34434 | ☐ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>SCOTT, BARBARA<br>2510 W DOLPHIN DR<br>CITRUS SPRINGS FL 34434 | ☐ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BROEDERS, LARRY<br>899 W. SMALLMAN PL<br>CITRUS SPRINGS FL 34434 | ☒ Delete | TITLE D<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DAVID L. GEORGE<br>10140 BISCAYNE DR.<br>CITRUS SPRINGS, FL. 34434 ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>DETRICK, RODNEY<br>3600 E. LAKE RD.<br>HERNANDO FL 34442 | ☒ Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | HOWARD M. WHALEY<br>1926 W. ALBURY PL<br>CITRUS SPRINGS, FL 34434 ☐ Change ☒ Addition |

12. I hereby certify that the information supplied with this filing does not qualify 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 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:** Barbara L Scott Pres Feb 13 04 352.489-9651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #