

# 2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT


Amended

FILED

04 MAY 10 PM 6:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

24068090

<b>DOCUMENT # 750425</b> 1. Entity Name <b>SUNCOAST CHURCH OF CHRIST, INC.</b>					
Principal Place of Business <b>5561 HYPOLUXO ROAD LAKE WORTH, FL 33463-4301</b>			Mailing Address <b>5561 HYPOLUXO ROAD LAKE WORTH, FL 33463-4301</b>		
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 <b>59-0389375</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
6. Name and Address of Current Registered Agent  <b>DEEM, TIMOTHY 5561 HYPOLUXO ROAD LAKE WORTH, FL 33463-4301</b>			7. Name and Address of New Registered Agent  Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>LALLA, CLARENCE</b>		NAME	<b>500036995145</b>	
STREET ADDRESS	<b>6190 HONEYWOOD WAY</b>		STREET ADDRESS	<b>05/21/04--01059--027 **61.25</b>	
CITY-ST-ZIP	<b>LAKE WORTH, FL</b>		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>LERRO, RICHARD J</b>		NAME		
STREET ADDRESS	<b>6585 MONMOUTH RD</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>WEST PALM BEACH, FL 33413</b>		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>GOSA, RAY</b>		NAME		
STREET ADDRESS	<b>3757 SATIN LEAR COURT</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>DELRAY BEACH, FL 33445</b>		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>DEEM, TIMOTHY</b>		NAME	<b>PD Deem, Timothy</b>	
STREET ADDRESS	<b>12487 SAWGRASS COURT</b>		STREET ADDRESS	<b>12487 Sawgrass Court</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH, FL 33414</b>		CITY-ST-ZIP	<b>West Palm Beach, FL 33414</b>	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>HALL, REGAN</b>		NAME		
STREET ADDRESS	<b>6262 VIA TOWNSEND ROAD</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>WEST PALM BEACH, FL 33415</b>		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
<b>SIGNATURE:</b> <i>Timothy Deem</i> <b>TIMOTHY DEEM, DIRECTOR</b>			Date <b>4/21/04</b> Daytime Phone # <b>642-2028</b>		

6