

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764782

FILED
Feb 10, 2004
Secretary of State**Entity Name:** UNITY CHURCH OF MARTIN COUNTY, INC.**Current Principal Place of Business:**213 SW MONTEREY RD
STUART, FL 34994 US**New Principal Place of Business:**211 S.E. CENTRAL PARKWAY
STUART, FL 34994 US**Current Mailing Address:**213 SW MONTEREY RD
STUART, FL 34994 US**New Mailing Address:**211 S.E. CENTRAL PARKWAY
STUART, FL 34994 US**FEI Number:** 59-2781912**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HOWARD, AMANDA G
213 SW MONTEREY RD
STUART, FL 34994 US**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: P () Delete
Name: ROWELL, DONALD VP
Address: 4260 SE COVE LAKE CIRCLE #102
City-St-Zip: STUART, FL 34997

Title: VP () Delete
Name: RICE, RAY E
Address: 903 SE OCEAN ROAD
City-St-Zip: STUART, FL 34996

Title: T () Delete
Name: SCOTT, BOB
Address: 846 SE CARNIVAL AVE
City-St-Zip: PORT ST LUCIE, FL 34982

Title: S () Delete
Name: MERRITT, PEGGY
Address: 719 SE SEAHAWK ST.
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: HOWARD, AMANDA G
Address: 284 NE ELM TERRACE
City-St-Zip: JENSEN BCH, FL

Title: D () Delete
Name: WALSH, THOM
Address: 2300 NE PARK ST.
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GIUNTA, DAVID
Address: 4260 SE COVE LAKE CIRCLE #102
City-St-Zip: STUART, FL 34997

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: POWERS, STEPHANIE
Address: 2222 SW MAYFLOWER DR.
City-St-Zip: PALM CITY, FL 34994

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: DAVID GIUNTA

P

02/10/2004

Electronic Signature of Signing Officer or Director_____
Date