

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # 803387

1. Entity Name
THE SALVATION ARMY



Principal Place of Business
**% LEGAL DEPARTMENT
1424 NE EXPRESSWAY N.E.
ATLANTA, GA 30329**

Mailing Address
**% LEGAL DEPARTMENT
1424 NE EXPRESSWAY N.E.
ATLANTA, GA 30329**



04052004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-0660607

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FAULKNER, DONALD
3101 LAKE ELLEN LANE
TAMPA, FL 33618**

**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) 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	CT LARSON, JOHN 615 SLATERS LANE ALEXANDRIA, VA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P NEEDHAM, PHILIP D 1424 N.E. EXPWY. ATLANTA, GA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPT SWYERS, PHILIP 1424 NE EXPWY ATLANTA, GA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ATT MOTHERSHED, DAVID R 1424 NE EXPRESSWAY ATLANTA, GA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TAS WARD, H. AL 1424 N.E. EXPWY. ATLANTA, GA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GOODIER, WILLIAM R N 2880 GRAVITT RD DULUTH, GA 30096

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04/12/04-80109-004 70.00

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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)(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:

PHILIP SWYERS
VICE PRESIDENT

4/6/04

Date Daytime Phone #