2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 08, 2004 8:00 am Secretary of State

						•			
1. Entity Nam	DAD CHURCH OF CHRIST	OF NEW PORT			07-08-200)4 90098 ()36 ****6	1.25	
C/O CHRIS E. STEELE C/O 6767 RIVER ROAD 676		Mailing Address C/O CHRIS E. STEELE 6767 RIVER ROAD NEW PORT RICHEY, FL 3	C/O CHRIS E, STEELE						
2. Principal Place of Business 3. N		3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		hg-NP	CR2E0	37 (10/03)		
City & State		City & State	City & State		36			plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of S	Status Desired		\$8.75 Add Fee Require	litional d	
	6. Name and Address of Current	Registered Agent		7. Name and Ad	dress of New	Registered	Agent		
STEELE, CHRIS E.			Name	Name					
6767 RIVE			Street Add	dress (P.O. Box Number is	Not Accepta	ble)	_		
	1								
			City		v .	FL	Zip Code	e	
	named entity submits this statement for	or the purpose of changing its re	egistered office or r	egistered agent, or both, it	n the State of	Florida. I am	familiar with,	and accept	
the obligat	tions of registered agent.	•							
SIGNATURE		<u></u>					_		
	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: f	Registered Agent signature	e required when reinstating)		DATE			
Filing Fee is \$61.25 Due by September 8, 2004 9. Election Campai Trust Fund Contr				\$5.00 May Be Added to Fees	FI	Make chec orida Depar	k payable to tment of St		
10.	OFFICERS AND D	INECTORS	11.	ADDITIONS/CHANG	SES TO OFFIC	CERS AND DI	RECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CLARK, CHANDLER G. 5132 IDLEWILD ST. NEW PORT RICHEY, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	DP FORTNEY, ROGER 4960 WELLBROOK DR. NEW PORT RICHEY, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	Change	Addition	
TITLE NAME STREET ADDRESS	T LINGER, STEPHEN L. 7316 ABINGTON AVE	Delete	TITLE NAME STREET ADDRESS	3213 Ellingt			Change	Addition	
CITY-ST-ZIP	NEW PORT RICHEY, FL	☐ Delete	CITY-ST-ZIP	New Port Ric	ney, Fi	4	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	STEELE, CHRIS E. 9531 SHAMOKIN LANE PORT RICHEY, FL 34668	C Detaile	NAME STREET ADDRESS CITY-ST-ZIP	See as			onungu		
TITLE NAME STREET ADDRESS	1	☐ Delete	TITLE NAME STREET ADDRESS				☐ Change	Addition	
CITY-ST-ZIP	1 1		CITY-ST-ZIP				_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Detete					☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-6-04 72

727-849-5951

Daytime Phone