## 2004 NOT-FOR-PRO **ANNUAL**

OFIT CORPORATION REPORT		FILED Apr 26, 2004 8:00 am Secretary of State
IRIST, INC.		04-26-2004 90452 024 ****61.25

DOCUMENT # N38598 1. Entity Name EMERALD COAST CHURCH OF CH Principal Place of Business 1 1 2 d c u e e Mailing Address % CECIL R. BELK % CECIL R. BELK 300 SOUTH AVENUE 300 SOUTH AVENUE FT. WALTON BEACH, FL 32547 FT. WALTON BEACH, FL. 32547 2. Principal Place of Business 3. Mailing Address 300 South Avenue 300 South Avenue 03222004 Cha-NP CR2E037 (10/03) City & State Applied For City & State Ft. Walter 4. FEI Number 59-3040400 t. Walton Beach Not Applicable OKa/ossa \$8.75 Additional Fee Required Country 5. Certificate of Status Desired П 0 Kaloosa 7. Name and Address of New Registered Agent BELK, CECIL R (P.O. Box Number is Not Acceptable) 878 MASTERS BLVD SHALIMAR, FL 32579 8. The above named and its 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 Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. n , ☐ Change ☐ Addition Delete TITLE Mullins, Walter J. 324 Schneider Drive FT. Walton Beach FL RICH LANDIS NAME NAME 317D GREENACRES RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT WALTON BEACH, FL 32547 CITY-ST-ZIP 32547 ☐ Addition ☐ Delete TITLE Change : TITLE Dane Randall Bryant 420 NE Woodrow RANDALL BRYANT NAME NAME 510 TRENTON STREET ADDRESS STREET ADDRESS FT WALTON BEACH, FL CITY-ST-ZIP CITY-ST-ZIF Ft Walton Beach FC 32547 Delete TITLE ☐ Change ☐ Addition LEE, JOYCE NAME NAME 121 SECOND AVE, SW STREET ADDRESS STREET ADDRESS FORT-WALTON BEACH, FL 32548 -City-St-7iP= CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BELK, EDNA NAME NAME STREET ADDRESS 878 MASTERS BLVD STREET ADDRESS SHALIMAR, FL 32579 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition BELK, CECIL NAME NAME STREET ADDRESS 878 MASTERS BLVD STREET ADDRESS SHALIMAR, FL 32579 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change BLAKERBY, DELIA NAME NAME STREET ADDRESS 510 TRENTON STREET ADDRESS FT WALTON BEACH, FL 32547 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.

| Compared to the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, 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. 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. I further certify that the information indicated on the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes. I further certify that the information indicated on the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and the corporation of the corporation or the receiver or trustee empowered to execute the corporation of the corporation of the corporation or the receiver or trustee empowered to execute the corporation of th

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