2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2004 8:00 am
Secretary of State
02-26-2004 90002 007 ****61.25

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1. Entity Name

EASTSIDE CHRISTIAN CHURCH OF HIGHLANDS COUNTY, INC.

MOORE CR2E037 (11/03)

Principal Place of Business	Mailing Address
101 LEE AVE LAKE PLACID FL 33852 US	101 LEE AVE LAKE PLACID FL 33852 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 1140 Suite, Apt. #, etc.
City & State	City & State: Lake Placid Fl.
Zip / Country	Zip: 33862 / Country: Highlands

4. FEI Number: 59-2297969 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COUCH, S. C. 112 IDA AVE LAKE PLACID FL 33852	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD COUCH, JANET S 112 IDA AVE LAKE PLACID FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CROSBIE, PHILLIP 3740 SKIPPER RD SEBRING FL 33872	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COUCH, S.C. 112 IDA AVE LAKE PLACID FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAKE, EVA 434 LEAHY AVE LAKE PLACID FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Milldred J. Wildman 223 Country Club Dr. Lake Placid, Fl. 33852 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SODERSTROM, JUDI 441 GRANT AVE NE LAKE PLACID FL 33852	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Robert Bowden 3012 Tanglewilde Ave. Lake Placid, Fl. 33852 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUTCHESS, VIRGINIA 3011 JACARANDA AVE LAKE PLACID FL 33852	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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: S.C. Couch president S. C. Couch 2-20-04 (863)464-2845
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #