2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705892

FILED Feb 19, 2004 Secretary of State

Entity Name: GULF STREAM BAPTIST ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 20 N.W. 46TH AVE. FT. LAUDERDALE, FL 33317 **Current Mailing Address: New Mailing Address:** 20 N.W. 46TH AVE FT. LAUDERDALE, FL 33317 FEI Number: 59-0862883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FLEMING, JOHN W 20 N.W. 46TH AVE. PLANTATION, FL 33317 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition RICE, DAVID BEVILL, EDDIE Name: Name: Address: 138 NE 1 STREET Address: 5600 CORAL RIDGE DR City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: CORAL SPRINGS, FL 33076 Title: () Delete Title: () Change () Addition HAMILTON, DAVID Name: Name: Address: 7241 TAFT STREET Address: City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: Title: VD () Delete Title: (X) Change () Addition HUGHES, DAVID Name: GREEN, WESLEY Name: 3800 SOUTH DOUGLAS ROAD Address: P.O. BOX 770067 Address: City-St-Zip: CORAL SPRINGS, FL 33077 City-St-Zip: MIRAMAR, FL 33025 Title: () Delete Title: () Change () Addition DE ROSE, JUDITH Name: Name: Address: 20 NW 46TH AVE. Address: PLANTATION, FL City-St-Zip: City-St-Zip:

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: EDDIE BEVILL PD 02/19/2004