

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007927

FILED
Mar 12, 2004
Secretary of State**Entity Name:** EVERGLADES COMMUNITY CHURCH, A UNITED METHODIST CONGREGATION, INC.**Current Principal Place of Business:**20170 PINES BLVD STE 302
PEMBROKE PINES, FL 33029**New Principal Place of Business:**20170 PINES BLVD
SUITE 302
PEMBROKE PINES, FL 33029**Current Mailing Address:**20170 PINES BLVD STE 302
PEMBROKE PINES, FL 33029**New Mailing Address:**20170 PINES BLVD
SUITE 302
PEMBROKE PINES, FL 33029**FEI Number:** 65-0701099**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JONES, PATRIC L ESQ
THE COLONIAL PLACE
1515 UNIVERSITY DRIVE STE #113
CORAL SPRINGS, FL 33071 US**Name and Address of New Registered Agent:**JONES, PATRIC L ESQ
300 S.E. 19TH STREET
FORT LAUDERDALE, FL 33316 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: _____

03/12/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: GREEN, M. EDWIN III
Address: 20170 PINES BLVD., SUITE 302
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TR () Delete
Name: ESCOTO, MAGGIE L
Address: 20170 PINES BLVD., SUITE 302
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TR () Delete
Name: MONTGOMERY, JENNIFER
Address: 20170 PINES BLVD., SUITE 302
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S () Delete
Name: HENG, PATRICIA
Address: 20170 PINES BLVD., SUITE 302
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PATRICIA HENG

S

03/12/2004

Electronic Signature of Signing Officer or Director

Date