

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740631

**Entity Name:** WESTSIDE CHURCH OF CHRIST OF DAYTONA BEACH,  
FLORIDA, INC.

**FILED**  
**Apr 23, 2017**  
**Secretary of State**  
**CC8572301091**

**Current Principal Place of Business:**

960 DR. MARY MCLEOD BETHUNE BLVD.  
DAYTONA BEACH, FL 32120-9178

**Current Mailing Address:**

960 DR. MARY MCLEOD. BETHUNE BLVD  
PO BOX 9178  
DAYTONA BEACH, FL 32120-9178 US

**FEI Number: 59-1786051**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JOHN HENRY BELL, SR.  
312 ALEATHA DRIVE  
DAYTONA BEACH, FL 32114 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

**Officer/Director Detail :**

Title PD  
Name BELL, JOHN HENRY, SR  
Address 312 ALEATHA DRIVE  
City-State-Zip: DAYTONA BEACH FL 32114

Title VD  
Name COLEMAN, JOSEPH L  
Address 1104 EDITH DR  
City-State-Zip: DAYTONA BEACH FL 32117

Title TD  
Name BELL, DAVID  
Address 4026 CALUSA LANE  
City-State-Zip: ORMOND BEACH FL 32174

Title D  
Name BELL, JR, LOUIS A  
Address 6737 FERRZ CIRCLE  
City-State-Zip: PORT ORANGE FL 32128

Title SD  
Name DURIAS, RICKY  
Address 707 HEINEMAN ST  
City-State-Zip: DAYTONA BEACH FL 32114

*I hereby 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 all other like empowered.*

**SIGNATURE: JOSEPH COLEMAN**

**VICE DIRECTOR**

**04/23/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date