

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760824

**FILED**  
**Feb 20, 2014**  
**Secretary of State**  
**CC9270434048**

**Entity Name:** COUNTRYSIDE CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

1850 MCMULLEN BOOTH  
CLEARWATER, FL 33759

**Current Mailing Address:**

1850 MCMULLEN BOOTH  
CLEARWATER, FL 33759

**FEI Number: 59-2167973**

**Certificate of Status Desired: No**

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

DAVIS, GLENN A  
554 LAKEWOOD DR.  
OLDSMAR, FL 34677 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 D  
Name MITCHELL, MARK  
Address 3037 WOODSONG LN  
City-State-Zip: CLEARWATER FL 33761

Title CD  
Name PITCHON, SOL  
Address 467 BRIDLE PATH WAY  
City-State-Zip: TARPON SPRINGS FL 34689

Title TD  
Name STEUER, MICHAEL  
Address 2613 BELHURST DR  
City-State-Zip: DUNEDIN FL 34698

Title DP  
Name KONRAD, BILL  
Address 3617 TOWN AVENUE  
City-State-Zip: NEW PORT RICHEY FL 34655

Title STFF  
Name POWELL, MATTHEW J  
Address 2685 CRYSTAL CIR  
City-State-Zip: DUNEDIN FL 34698

*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: MICHAEL STEUER**

**TREASURER**

**02/20/2014**

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

\_\_\_\_\_  
Date