

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

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90024 020 ****61.25

DOCUMENT # 700172		
1. Entity Name FIRST CHRISTIAN CHURCH OF TITUSVILLE, INC.		

Principal Place of Business 2880 JAY JAY RD P O BOX 164 TITUSVILLE FL 32781 US	Mailing Address P O BOX 164 TITUSVILLE FL 32781 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-1724419		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WATTWOOD JR, H E 1010 LANE AVE P O BOX 201 TITUSVILLE FL 32780		7. Name and Address of New Registered Agent	
		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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	D BACKUS, S. 4170 HICKORY LAKE CT TITUSVILLE FL 32780 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BACKUS, W. 2981 CRYSTAL CT TITUSVILLE, FL 32780 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, J. 4490 GRAY AVENUE TITUSVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOWER, BOB 3080 LAS PALMAS LN TITUSVILLE, FL 32780 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCDOLE, H. 1295 NOVA TERRACE TITUSVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEASTER, TOM 2173 KINGS CROSS TITUSVILLE, FL 32796 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTD RATLIFF, S. 2615 BAYWOOD DR. TITUSVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WATTWOOD, H E JR 1010 LANE AVE TITUSVILLE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHILDS, DON 3067 ELDER ST TITUSVILLE FL ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-18-04 321-267-2704

Date

Daytime Phone #