2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004 08:00 AM
Secretary of State

DOCUMENT # 702210

1. Entity Name
PALO ALTO CHURCH OF CHRIST INC

Principal Place of Business	Mailing Address
3119 HWY 231 PANAMA CITY FLA, 32405 US	3119 HWY 231 PANAMA CITY, FL 32405 US

01252004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1701205
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, JOHN L.
3116 SARASOTA AVENUE
PANAMA CITY, FL 32405

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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: John L Johnson 2/14/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

U00000073827
03/08/04-80084-011 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HARRISON, W GERALD
STREET ADDRESS	379 BUNKERS COVE RD
CITY-ST-ZIP	PANAMA CITY, FL
TITLE	D
NAME	KELLER, JOE
STREET ADDRESS	116 BUNKERS COVE RD.
CITY-ST-ZIP	PANAMA CITY, FL
TITLE	D
NAME	JOHN L JOHNSON
STREET ADDRESS	3116 SARASOTA AVE
CITY-ST-ZIP	PANAMA CITY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

X **SIGNATURE:** John L Johnson 2/27/04 850-763-1481
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #