2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709093

FILED Feb 28, 2005 Secretary of State

Entity Name: EASTSIDE BAPTIST CHURCH OF PUNTA GORDA, FLORIDA INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

6220 GOLF COURSE BLVD. PUNTA GORDA, FL 33982

Current Mailing Address: New Mailing Address:

6220 GOLF COURSE BLVD PUNTA GORDA, FL 33982

FEI Number: 59-2316468 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALTON, CHEATHAM

18151 WILD PEPPER COURT
PUNTA GORDA, FL 33982 US

HUDSON, LARRY PD
6826 SW BELVOIR DRIVE
ARCADIA, FL 34266 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: LARRY HUDSON 02/28/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: D (X) Change () Addition Name: HEADRICK, BOB Name: HEADRICK, BOB

Address: 1315 NARRANJA ST Address: 1315 NARRANJA ST
City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950

Title: PD () Delete Title: D (X) Change () Addition Name: CHEATHAM, ALTON Name: CHEATHAM, ALTON

Address: 18151 WILD PEPPER CT. Address: 18151 WILD PEPPER CT. City-St-Zip: PUNTA GORDA, FL 33982 City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete Title: () Change () Addition

 Name:
 POWELL, CARL
 Name:

 Address:
 6366 ELLIOTT ST
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33950
 City-St-Zip:

 Title:
 D
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 HUDSON, LARRY
 Name:
 HUDSON, LARRY

 Address:
 6826 SW BELVOIR DR.
 Address:
 6826 SW BELVOIR DR.

 City-St-Zip:
 ARCADIA, FL 34266
 City-St-Zip:
 ARCADIA, FL 34266

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: LARRY HUDSON PD 02/28/2005