2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712338

FILED Mar 04, 2004 Secretary of State

Entity Name: ROSER MEMORIAL COMMUNITY CHURCH OF ANNA MARIA, FLORIDA, INC.

Current P	rincipal Place of Busines	s:	New Principal Place	of Business:
FLORIDA, INC. P.O. BOX 247 ANNA MARIA, FL 34216		FLORIDA, INC. 512 PINE AVENUE ANNA MARIA, FL 34		
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
FLORIDA, P.O. BOX NNA MA				
El Number	: 59-1095982 FEI Number	Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of Current Regi	stered Agent:	Name and Address	of New Registered Agent:
HORIGAN				
HOLMES	DE COURT BEACH, FL 34217 US	statement for the nu	rnose of changing its registers	ed office or registered agent or both
HOLMES The above	BEACH, FL 34217 US	statement for the pu	rpose of changing its registere	ed office or registered agent, or both,
HOLMES The above	BEACH, FL 34217 US e named entity submits this see of Florida. RE:	·		ed office or registered agent, or both,
HOLMES The above In the Stat	BEACH, FL 34217 US e named entity submits this s e of Florida.	·		ed office or registered agent, or both, Date
HOLMES The above the Stat SIGNATU	BEACH, FL 34217 US e named entity submits this see of Florida. RE:	·	ıt	
HOLMES The above the Stat SIGNATU	BEACH, FL 34217 US e named entity submits this se of Florida. RE: Electronic Signature	·	ıt	Date
HOLMES The above In the State SIGNATU DFFICER ittle: lame: ddress:	BEACH, FL 34217 US e named entity submits this se of Florida. RE: Electronic Signature S AND DIRECTORS: TD () Delete KUHLMANN, LYLE 105 STARFISH RD	·	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: DEBORAH PETTEE SD 03/04/2004