
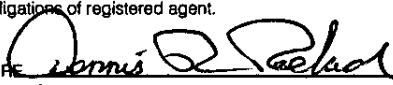
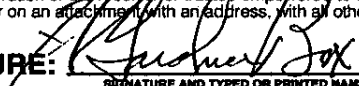


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90047 046 ****61.25

| | | | |
|---|--|---|--|
| DOCUMENT # 712351 | |  | |
| 1. Entity Name BOARD OF TRUSTEES OF THE THONOTOSASSA METHODIST CHURCH INCORPORATED | | | |
| Principal Place of Business 11905 FORT KING HWY THONOTOSASSA, FL 33592 US | | Mailing Address P.O. BOX 406 THONOTOSASSA, FL 33592-0406 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| | | 4. FEI Number 59-2350799 | |
| | | Applied For <input type="checkbox"/> Not Applicable | |
| | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| ROEBUCK, DENNIS R 10913 MISTLETOE DRIVE THONOTOSASSA, FL 33592 | | Name Street Address (P.O. Box Number is Not Acceptable) City State: 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  | | Dennis R. Roebuck, Pastor DATE: 4/12/04 | |
| Filing Fee is \$61.25 Due by May 1, 2004 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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: D NAME: HARVESTER, JIMMY STREET ADDRESS: 3409 W. IDLEWILD AVE CITY-ST-ZIP: TAMPA, FL 33614 | <input type="checkbox"/> Delete | TITLE: TR NAME: Harvester, Jimmy STREET ADDRESS: 3409 W. Idlewild Ave CITY-ST-ZIP: Tampa, FL 33614 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: C NAME: MILLER, GARY STREET ADDRESS: 12421 PALM TREE DRIVE CITY-ST-ZIP: THONOTOSASSA, FL 33592 | <input checked="" type="checkbox"/> Delete | TITLE: C NAME: Box, Gardner STREET ADDRESS: 5110 Five Acre Road CITY-ST-ZIP: Plant City, FL 33565 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE: TR NAME: SCOTT, NORVAL STREET ADDRESS: 11322 RUSSELL DRIVE CITY-ST-ZIP: SEFFNER, FL 33584 | <input checked="" type="checkbox"/> Delete | TITLE: TR NAME: Gohn, James STREET ADDRESS: 10330 Skewlee Road CITY-ST-ZIP: Thonotosassa, FL 33592 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE: S NAME: LANCOUR, ED STREET ADDRESS: 11928 GROVEWOOD AVE CITY-ST-ZIP: THONOTOSASSA, FL 33592 | <input type="checkbox"/> Delete | TITLE: TR NAME: Lancour, Ed STREET ADDRESS: 11928 Grovewood Ave CITY-ST-ZIP: Thonotosassa, FL 33592 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: TR NAME: JOHNSON, ALLEN STREET ADDRESS: 5112 FIVE ACRE ROAD CITY-ST-ZIP: PLANT CITY, FL 33565 | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: TR NAME: DAVIDSON, JOHN STREET ADDRESS: 11128 SERENITY OAKS LN CITY-ST-ZIP: THONOTOSASSA, FL 33592 | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> 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 attaching form with an address, with all other like empowered. | | | |
| SIGNATURE:  | | Gardner Box, Chairperson DATE: 4/12/04 DAYTIME PHONE #: 813-986-4859 | |

Attachment

14003405

#712351

Additions:

S
Fetterolf, Arlene
P.O. Box 355
Thonotosassa, FL 33592

TR
Harvester, Carol
3409 W. Idlewild Avenue
Tampa, FL 33614

TR
Lancour, Sandi
11928 Grovewood Avenue
Thonotosassa, FL 33592