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

## Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # 715658** 1. Entity Name 04-30-2004 90364 011 \*\*\*\*61.25 SOUTHSIDE BAPTIST CHURCH OF MULBERRY, INC. Principal Place of Business Mailing Address 251 MOSES ST MULBERRY FL 33860 PO BOX 525 MULBERRY FL 33860 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-1265078 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name SOUTHSIDE BAPTIST CHURCH Street Address (P.O. Box Number is Not Acceptable) 251 MOSES ST MULBERRY FL 33860 City 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. 4-28-04 SIGNATURE MOSTIA CONNELL Church Secretary Signature, typed or printed name of registered agent and litle if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE Delete TITLE Change MARTIN, HAROLD NAME NAME 3519 PINEDALE DRIVE STREET ADDRESS STREET ADDRESS LAKELAND FL 33811 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SIMPSON, TERRY NAME NAME 3544 PORTER RD STREET ADDRESS STREET ADDRESS LITHIA FL 33547 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition SHOUPE, MICHAEL NAME NAME 6702 COUNTY LINE RD STREET ADDRESS STREET ADDRESS LAKELAND FL 33811 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE CURLEE, CECIL NAME NAME 5779 CHERRY LANE STREET ADDRESS STREET ADDRESS LAKELAND FL 33811 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE CHESTNUT, GEORGE REV NAME 1106 PORLAND AVE STREET ADDRESS STREET ADDRESS MULBERRY FL 33860 CITY-ST-ZIP CTTY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Horge Mexicon - George Chest

4-28-04

863-425-2786

Daytime Phone #