NOT-FOR-PROFIT CORPORATION

Mar 10, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # 1/1308 03-10-2003 90182 006 ****70.00 Garden City Church of Christ, INC. 80051245 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Addres <u> 2611</u> Avenue Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 717308662 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent J Sirmons DO NOT WRITE IN THIS SPACE City 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 (NOTE: Registered Agent signature required when reinstating) DATE FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** мау Ве Initial or Amended UBR Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS TITLE TITLE CR2E037B (12/02) Jones, Isaac 3081 Hammond Road NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Fort Pierce, FL 34946 CITY-ST-7IP TITLE TITLE Sirmons, Fred NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE Sirmons, Fred 1402 Avenue G Fort Pierce, FL 34960 NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZiP CITY-ST-ZIP IN THIS SPACE Harris, Sammy Sr. NAME NAME 2802 Avenue H STREET ADDRESS STREET ADDRESS Fort Pierce, FL CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE wortham, Willie NAME NAME 3005 Iroquois Avenue Fort Pierce, FL 34946 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F TITLE Sirmons, Jonas W 3128 Seneca Avenue Fort Pierce, FL 34946

12. Thereby 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 on an extended the same of the corporation of the corporation of the corporation of the receiver of trustee. attachment with an address, with all other like empowered

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: >

NAME

STREET ADDRESS

CITY-ST-7IP

773-461-2492

FILED