2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719732



FILED
Mar 12, 2003 8:00 am
Secretary of State

FIRST CHURCH OF CHRIST OF FLORIDA, INC.							03-12-2003 90103 008 ****70.00					
Principal Place of Business 2171 N.E. HENRY ST. PALM BAY FL 32905 2. Principal Place of Business 2171 N.E. HENRY ST. Suite, Apt. #, etc. City & State PALM BAY FL			2171 N.E	Mailing Address 2171 N.E. HENRY ST. PALM BAY FL 32905								
			3. Mailing Address 2171 N.E. HENRY ST. Suite, Apt. #, etc. City & State PALM BAY FL			CHECK HERE IF MAKING CHANGES						
											4. FEI Number 05-0103800	
						32905 Country BREVARD				BREVARD	·	5. Certificate of Status Desired See Requir
	6. Name	and Address of Current	Registered	Agent			7. Name and A	ddress of New I			· .	\dashv
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SCRIVEN, SAMMIE 805 E. POPLAR LANE MELBOURNE FL 32901					Stree	t Address (F	P.O. Box Number	is Not Acceptabl	e)			
MELBU	UHNE FL 329	Ul			City	·	· · · · · · · · · · · · · · · · · · ·			Zip Co	de	
A T:		<u>•</u>							FL			
the obliga	ve named entity ations of registe	v submits this statement for	or the purpos	se of changing its	registered office	or registere	ed agent, or both,	in the State of FI	orida. I am fa	miliar with	, and accept	
	•											
SIGNATURE												
	Signature, typed of	or printed name of registered agent	and sister if II									,
			and title if applica	able. (NOT)	E: Registered Agent sig	nature required	when reinstating)		DATE			
		FEE IS \$61.25	and the rappice	··	npaign Financing	· -	\$5.00 May Be Added to Fees		DATE NKe Check da Departr			-
10.		FEE IS \$61.25		9. Election Car	npaign Financing Contribution.		\$5.00 May Be Added to Fees	Flori	ike Check da Departr	nent of	State	
10.				9. Election Car Trust Fund C	npaign Financing Contribution.		\$5.00 May Be	Flori	ake Check da Departr	nent of	State	16
	FILE NOW:	FEE IS \$61.25 OFFICERS AND DIF		9. Election Car	npaign Financing Contribution.		\$5.00 May Be Added to Fees	Flori	ake Check da Departr	nent of	State	(60/0
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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.

SIGNATURE: JAMES MEDONALTURE REQUIRED

Manual 1-5 02 722-9813