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

Feb 19, 2004 08:00 AM **DOCUMENT # 721625 Secretary of State** 1. Entity Name TRUSTEES, SCENIC HEIGHTS BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 3351 CREIGHTON BLVD. 3351 CREIGHTON BLVD. PENSACOLA FL 32504 PENSACOLA FL 32504 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. MOORE CR2E037 (11/03) 4. FEI Number City & State City & State Applied For 59-1105021 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOWARD, CHRIS 3629 ANDREW JACKSON DR Street Address (P.O. Box Number is Not Acceptable) PACE FL 32571 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 Signature, typed or printed name of registored agent and little if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution, Added to Fees Due By May 1, 2004 Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Change TITLE ☐ Delete TIME ☐ Addition U00000058382 HOWARD, CHRIS NAME 02/20/04-80028-001 61.25 3629 ANDREW JACKSON DR STREET ADDRESS STREET ADDRESS PACE FL City-ST-789 CITY-SI-ZIP TITLE Delete ☐ Change ☐ Addition BAILEY, CLYDE 2125 MORNINGSIDE DRIVE STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-SI-ZIP CSTY-ST-7IP TITLE Defete TITLE ☐ Change ☐ Addition RANDALL, THOMAS C MAME NAME 5605 TRAFALGAR DR STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-ST-7IP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE WALLER, WILLIAM MAME NAME 3899 SUMMER, DR. STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change HARDY, COLEMAN JOHN J NAME 2641 E JOHNSON AVE. STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-ST-ZIP CITY - ST-789 ■ Addition TITLE Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St. 7iP

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:

1415 C. Howard (Pras) 2/8/04

FILED