


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 723753		
1. Entity Name NORTHSIDE CHRISTIAN CHURCH OF CHRIST OF ENGLEWOOD, INC.		
Principal Place of Business OF ENGLEWOOD INC 685 N. INDIANA AVE. ENGLEWOOD, FL 34223	Mailing Address OF ENGLEWOOD INC 685 N. INDIANA AVE. ENGLEWOOD, FL 34223	
DO NOT WRITE IN THIS SPACE		01102005 No Chg-NP CR2E037 (10/03)
		4. FEI Number 65-0049115 Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BLOOM, JANIS R 1802 WHISPERING PINES CIR ENGLEWOOD, FL 34223		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BLOOM, JANIS R 1802 WHISPERING PINES CIR ENGLEWOOD, FL 34223	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SMITH, RICHARD T 8472 BUTTON QUAIL DRIVE ENGLEWOOD, FL 34214	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAST BRADBURN, KEN 5811 ALBERT PLACE SARASOTA, FL 342316001	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIHALIK, THOMAS 617 BRAMBLE WOOD LANE ENGLEWOOD, FL 34223	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u>Jan R. Bloom</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/13/05 941-475-0538 <small>Date Daytime Phone #</small>