

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

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90181 009 \*\*\*\*66.25

**DOCUMENT # 732634**

1. Entity Name

FIRST CHURCH OF GOD OF SOUTH VENICE, INC.



Principal Place of Business

351 ORANGE RD.  
VENICE FL 34293

Mailing Address

351 ORANGE RD.  
VENICE FL 34293

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-6558045

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOONE, E G  
1001 AVENIDA DEL CIRCO  
VENICE FL 33595

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution ☒

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME FICHTENBERG, RONALD  
STREET ADDRESS 3220 VALENCIA DR  
CITY-ST-ZIP VENICE FL ☐ Delete

TITLE D  
NAME BETTS, BILL  
STREET ADDRESS 4110 Mocha Ave  
CITY-ST-ZIP N. PORT, FL 34287 ☐ Change ☒ Addition

TITLE D  
NAME MILLIKEN, JIM  
STREET ADDRESS 6763 HIGDON RD  
CITY-ST-ZIP N. PORT FL 34287 ☒ Delete

TITLE D  
NAME WALSH, TOM  
STREET ADDRESS 525 N. ALBEE FARM RD  
CITY-ST-ZIP NOKOMIS, FL 34275 ☐ Change ☒ Addition

TITLE D  
NAME SPURLOCK, ROB  
STREET ADDRESS 510 BURKE RD  
CITY-ST-ZIP SARASOTA FL 34243 ☐ Delete

TITLE D  
NAME WALSH, TOM  
STREET ADDRESS 525 N. ALBEE FARM RD  
CITY-ST-ZIP NOKOMIS, FL 34275 ☐ Change ☒ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

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:

*Ronald Fichtenberg*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-04 941 493-2605  
Date Daytime Phone #