2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 734795

1. Entity Name
BIBLE TRUTH CHAPEL OF NEW PORT RICHEY, FLORIDA, INCORPORATED

FILED
04 NOV 29 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
6915 SHADY ACRES BLVD. NEW PORT RICHEY, FL 34653-3120	6915 SHADY ACRES BLVD. NEW PORT RICHEY, FL 34653-3120 US

11152004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1724593 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MUSICARO, ANGELO (SIC)
18520 WILDLIFE TR
SPRINGHILL, FL 34610

7. Name and Address of New Registered Agent

Name MUSICARO, ANGELO

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

18520 WILDLIFE TR.

City SPRINGHILL FL Zip Code 34610

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 A. Musicaro ANGELO MUSICARO 11-22-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARRIS, KENNETH D 8960 FAIRCHILD CT NEW PORT RICHEY, FL 34654	☐ Delete	PD ANGELO MUSICARO 18520 WILDLIFE TRAIL SPRINGHILL, FLORIDA 34610-2236	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST FALKNER, CHARLES R 8748 BASS LAKE DRIVE NEW PORT RICHEY, FL 34654	☐ Delete	SD PAULA M. MUSICARO 18520 WILDLIFE TRAIL SPRINGHILL, FLORIDA 34610-2236	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FALKNER, CAROLYN 8748 BASS LAKE DRIVE NEW PORT RICHEY, FL 34654	☐ Delete	TD ELIZABETH M. COSTA 8600 HUNTING SADDLE DR. BAYONET POINTE, FLORIDA 34667-2523	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	400043050394 11/29/04--01078--024 **70.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: ANGELO MUSICARO A. Musicaro 11-22-04 (727) 845-5907
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #