2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005
Secretary of State

DOCUMENT# 735419

Entity Name: SOUTHSIDE ESTATES BAPIST CHURCH

Current Principal Place of Business:

4000 KERNAN BLVD S
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

4000 KERNAN BLVD S
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 59-0766996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKENZIE, RONNIE L DR
4000 KERNAN BLVD S
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	CD	( ) Delete
Name:	HARRISON, JAMES JR.	
Address:	11916 LITTLE CREEK LANE	
City-St-Zip:	JACKSONVILLE, FL	
Title:	D	( ) Delete
Name:	MCLEOD, NEAL,	
Address:	10505 HIGHPOINT RD.	
City-St-Zip:	JACKSONVILLE, FL	
Title:	S	( ) Delete
Name:	BECK, GLENDA	
Address:	3966 HEATH RD	
City-St-Zip:	JACKSONVILLE, FL 32277	
Title:	D	( ) Delete
Name:	PRINCIPE, DAN	
Address:	2875 ANNETTE CIRCLE	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	P	( ) Delete
Name:	MCKENZIE, RONNIE L,	
Address:	3266 SOUTHSIDE BLVD	
City-St-Zip:	JACKSONVILLE, FL	
Title:	T	( ) Delete
Name:	CHAPPELL, JOEL A,	
Address:	2282 BROADWATER DR	
City-St-Zip:	JACKSONVILLE, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENDA F BECK S 01/20/2005
Electronic Signature of Signing Officer or Director — Date