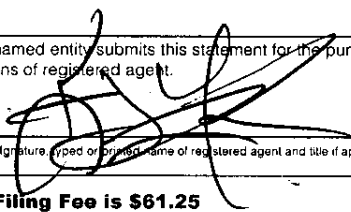
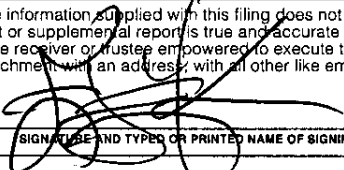


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90033 013 ****61.25

DOCUMENT # 738961 1. Entity Name SOUTHSIDE BAPTIST CHURCH OF ST. LUCIE COUNTY, INC.					
Principal Place of Business 302 E WEATHERBEE RD. FT. PIERCE, FL 34982			Mailing Address 302 E WEATHERBEE RD. FT. PIERCE, FL 34982		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2039248	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MCLEOD, JEFF 2629 RAINBOW DRIVE FORT PIERCE, FL 34981				7. Name and Address of New Registered Agent Name Edward J Fredryk Street Address (P.O. Box Number is Not Acceptable) 3405 Live Oak Ln City Fort Pierce FL Zip Code 34981	
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  DATE 2/10/04 (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)					
Filing 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 NAME STREET ADDRESS CITY-ST-ZIP	TR GATES, DERRELL A. 229 GARDEN AVE FORT PIERCE, FL 34982 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Randy Harden 392 Bay Singer Ave Fort Pierce FL 34982 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FOSSETT, JAMES 4008 GREENWOOD DRIVE FORT PIERCE, FL 34982 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR GATES, ROGER L 4805 BUCHANAN DR FORT PIERCE, FL 34982 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RT MEDFORD, BILL 5006 ELM AVE. FORT PIERCE, FL 34982 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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:  DATE 2/10/04 (Signature and typed or printed name of signing officer or director)					

54006538



02032004 Chg-NP CR2E037 (10/03)