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

May 03, 2004 8:00 am Secretary of State **DOCUMENT # 740453** 1. Entity Name 05-03-2004 90683 011 ****61.25 FIRST CHRISTIAN CHURCH OF ORANGE PARK, INC. Principal Place of Business Mailing Address FIRST CHRISTIAN CHURCH OF ORANGE PARK FIRST CHRISTIAN CHURCH OF ORANGE PARK 2876 MOODY RD. ORANGE PARK FL 32073 2876 MOODY RD. **ORANGE PARK FL 32073** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-1840674 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RIZZI, ANTHONY D Street Address (P.O. Box Number is Not Acceptable) 2306 KILKENNY COURT MIDDLEBURG FL 32068 City 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Due By May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE Change Addition ☐ Delete RIZZI, ANTHONY D NAME NAME 2306 KILKENNY COURT STREET ADDRESS STREET ADDRESS MIDDLEBURG FL 32068 CITY-ST-ZIP CITY-ST-ZIP VCD TITLE ☐ Delete TITLE Change Addition SCHNEIDER, JAMES NAME NAME 3239 DEERFIELD POINTE DR STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-ZIP TD TITLE ☐ Delete TITLE ☐ Change Addition BROUGH; ROBERT F NAME NAME 3786 CREEK HOLLOW LANE STREET ADDRESS STREET ADDRESS MIDDLEBURG FL 32068 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE Addition BROWN, ROBERT NAME 1438 CONESTOGA COURT STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32065** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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: Anthony D. RIZZI SIGNATURE AND TYPED CHAPTINITED NAME OF SIGNING OFFICER OR DIRECTOR

FILED