

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90043 047 ****61.25

DOCUMENT # 741989 1. Entity Name HILLTOP CHURCH OF CHRIST INC					
Principal Place of Business HILLTOP CHURCH OF CHRIST INC 2100 AVE T NE WINTER HAVEN, FL 33881			Mailing Address HILLTOP CHURCH OF CHRIST INC 2100 AVE T NE WINTER HAVEN, FL 33881		
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 59-0174197 74-3111366	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DAVIS, EDWIN, JR. 2209 9TH LANE, N.E. WINTER HAVEN, FL 33881			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DAVIS JR, EDWIN	NAME			
STREET ADDRESS	2209 9TH LANE N.E.	STREET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN, FL	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	D WRIGHT, THOMAS	NAME	D Wright, Thomas		
STREET ADDRESS	709 NEW HOPE ST	STREET ADDRESS	140 Mirror Lane		
CITY-ST-ZIP	AUBURNDALE, FL	CITY-ST-ZIP	Winter Haven, FL 33881		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SERIGHT, IVORY	NAME			
STREET ADDRESS	1701 VAUXHALL RD	STREET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN, FL	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MAJOR, FRANK	NAME			
STREET ADDRESS	1450 10TH ST NE	STREET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN, FL	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:		Edwin Davis, Jr. 3/14/04 863-837-1157			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			

all document

Doc# 741989

Please note changes
Highlighted in yellow

Any Question please
Call Hilltop Church of Christ
(863) 293-1791

Thanks.
