2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746198

1. Entity Name

DESTIN CHURCH OF CHRIST, INC.



FILED Feb 19, 2003 8:00 am § Secretary of State

02-19-2003 90164 038 ****61.25

			1	VE TROP				
150 BEACH ST.		Mailing Address 150 BEACH ST. DESTIN FL 32541	150 BEACH ST.		00034301			
2. Principal Place of Business 3.		3. Mailing Address						
				(1994) (1684) ()	018	JA Old ah dal ah d	ilosi asani sebi	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 59-1941244 Applied For Not Applied by			
Zip	Country	Zip	Country	5. Certificate of St		\$8.75 A	dditional	
6.	Name and Address of Curren	t Registered Agent		7. Name and Add	ress of New Registered A		ea	
WALTED D. O.	007		Name				" ,	
Walter D. Si 150 Beach D Destin Fl 32	R. ·	· .	-Street A	ddress (P.O. Box Number is N	lot Acceptable)			
DEOTHY IE SE	V		City			Zip Co	de	
8. The above name	ed entity submits this statement for fregistered agent.	or the company of the		· · · · · · · · · · · · · · · · · · ·	FL_			
<u>. </u>	NOW: FEE IS \$61.25	9. Election C	OTE: Registered Agent signature ampaign Financing Contribution.	\$5.00 May Be	Make Check	Payable	to	
<u>(a</u>		, mast rand	CONTINUOUS, (Added to Fees	Florida Departr	ment of	State	
TITLE STD	OFFICERS AND DI		11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRE	ECTORS IN	V 10	
	TER, TOM	☐ Delete	TITLE			☐ Change	Addition	
	MARS		NAME STREET ADDRESS		•			
	TIN FL 32541		CITY-ST-ZIP					
STREET ADDRESS 358 (TT, WALTER D SAILFISH DR	☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	☐ Addition	
TITLE VPD	ΠN FL 32541		CITY-ST-ZIP					
	ON, JAMES	Delete Delete	NAME	tv-		Change	Addition	
STREET ADDRESS 5 CA	NOE CT		STREET ADDRESS					
	IN FL 32541		CITY-ST-ZIP					
ITLE DIARD)AR, BERNARD	☐ Delete	TITLE	<u> </u>		Change	Addition	
	NORWOOD DR. #10		NAME STREET ADDRESS					
	IN FL 32250		CITY-ST-ZIP					
TLE		☐ Delete	TITLE		Г	Change	☐ Addition	
AME Treet address			NAME					
ITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TLE		☐ Delete	TITLE			7 Cha		
AME			NAME		Ł	Change	☐ Addition	
TREET ADDRESS TY-ST-ZIP			STREET ADDRESS					
			CITY-ST-ZIP				ì	

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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

850-837-8050