

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 22, 2004
Secretary of State**

DOCUMENT# 748387

Entity Name: PEACE IN CHRIST COMMUNITY, INC.

Current Principal Place of Business:

173 CORRINE PLACE
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

173 CORRINE PLACE
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 59-1941633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOYT, MARTHA P
173 CORRINE PLACE
KEY LARGO, FL 33037

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: D () Delete
Name: SOTO, JAIME
Address: 19011 STERLING DRIVE
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: HOYT, MARTHA,
Address: 173 CORRINE PLACE
City-St-Zip: KEY LARGO, FL 33037

Title: TD () Delete
Name: SULLIVAN, DOROTHY T
Address: 29 UNION SQUARE
City-St-Zip: RANDOLPH, MA 02368

Title: SD () Delete
Name: CHEATHAM, MARGUERITE,
Address: 401 W ILLINOIS APT #32
City-St-Zip: SOUTHERN PINES, NC 28387

Title: DV () Delete
Name: CARRION, WILLIAM,
Address: POST OFFICE BOX 60091
City-St-Zip: PALM BAY, FL 32906

Title: DV () Delete
Name: PEMBERTON, RICHARD L
Address: 140 MAPLE ST
City-St-Zip: LEXINGTON, MA 02420

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
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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: HUTCHINS, MARY

D

01/22/2004

Electronic Signature of Signing Officer or Director

Date

HUTCHINS MARY
P.O.BOX 766
CATAMUT MA 02534