## 2004 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

## FILED Aug 04, 2004 8:00 am Secretary of State

1. Entity Nam	MENT # 748800 ST CONGREGATIONAL CHEN, FL, INC.	CHURCH,		5 l	08-04-2004 90018 032 ****61.25			
P.O. BOX 67	TROPIC AVE. & WASHINGTON ST.	Mailing Address CORNER OF TROPIC AVE. P.O. BOX 67 INTERLACHEN, FL 3214		 Bay bahir bahi bahi birii birii birii birii birii birii birii birii				
2. Principal P	lace of Business	3. Mailing Address	<u></u>					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		07132004 Chg-N	P CR2E037 (10/03)			
City & Stat	e	City & State		4. FEI Number 59-2893656	Applied For Not Applicable			
Zip	· Country	Zip	Country	5. Certificate of Status	Desired			
	6. Name and Address of Curr	ent Registered Agent		7. Name and Address	of New Registered Agent			
OWEN, HOWARD N 105 SHORE SIDE LANE INTERLACHEN, FL 32148			Street Address (R.O. Box Number is Not Acceptable)  Street Address (R.O. Box Number is Not Acceptable)  Output  Description:					
	ų.		nterlachen	FL 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.  SIGNATURE  SIGNATURE								
Signature, based or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
	Signature, typed or printed name of registered a	pent and title if applicable. (NOTE: F	legistered Agent signaturi	e required when reinstating)	DATE			
D	Signature, seed or printed name of registered a Filling Fee is \$61.25 ue by September 8, 2004	gent and title if applicable. (NOTE: F  9. Election Camp  Trust Fund Col	aign Financing	e required when reinstating)  \$5.00 May Be Added to Fees	Make check payable to Florida Department of State			
D 10.	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	aign Financing	\$5.00 May Be Added to Fees	Make check payable to			
·	Filing Fee is \$61.25 ue by September 8, 2004 OFFICERS AND	9. Election Camp Trust Fund Co	aign Financing ntribution.	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO	Make check payable to Florida Department of State			
10.	Filing Fee is \$61.25 ue by September 8, 2004  OFFICERS AND CD WOODS, HARTEY	9. Election Camp Trust Fund Co	aign Financing ntribution.   11. TITLE NAME	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO	Make check payable to Florida Department of State  D OFFICERS AND DIRECTORS IN 10  Change			
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 8, 2004 OFFICERS AND CD WOODS, HARTEY 187 C.R. 315 N.	9. Election Camp Trust Fund Co	aign Financing ntribution.   11.  TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO Tanet Davis	Make check payable to Florida Department of State  O OFFICERS AND DIRECTORS IN 10  Change			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 ue by September 8, 2004 OFFICERS AND CD WOODS, HARTEY 187 C.R. 315 N. INTERLACHEN, FL 32148	9. Election Camp Trust Fund Con DIRECTORS	aign Financing ntribution.   11.  IIILE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO	Make check payable to Florida Department of State  D OFFICERS AND DIRECTORS IN 10  Change			
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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:	Janet Darris.	JANET DAVIS	7-29-04	386-684-0226
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGN		Date	Daytime Phone #