2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753159

FILED Feb 12, 2004 Secretary of State

Entity Name: SOUTHSIDE UNITED METHODIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 3120 HENDRICKS AVE. JACKSONVILLE, FL 322071299 **Current Mailing Address: New Mailing Address:** 3120 HENDRICKS AVE JACKSONVILLE, FL 322071299 FEI Number: 59-0760228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOORE, JOHN G JR. 10756 CROSSWICKS RD US JACKSONVILLE, FL 32256 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FAWBUSH, ANDREW Name: Name: 917 BROOKWOOD RD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: SD () Delete Title: () Change () Addition THOMPSON, SUSAN Name: Name: Address: 1200 SAN AMARO Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: () Delete Title: () Change () Addition JARRELL, CINDY Name: Name: Address: 1354 SAN MARCO Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: TD () Delete Title: (X) Change () Addition Name: GORDON, METZ Name: ATKINS, CARRIE 1844 ORANGE COVE RD 1005 SARATOGA RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32207 Title: () Delete Title: (X) Change () Addition GARNER, WOODROW GARNER, WOODROW Name: Name: 11504 SEDGEMOOR DR. 11504 SEDGEMOOR DR. Address: Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32223 Title: () Delete Title: () Change () Addition DONOVAN, TOM Name: Name: Address: 2963 FRONT RD. Address: JACKSONVILLE, FL 32257 City-St-Zip: 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: TOM DONOVAN PRES 02/12/2004