

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756375

FILED  
Jan 07, 2004  
Secretary of State

Entity Name: DUNEDIN ASSEMBLY OF GOD, INC.

**Current Principal Place of Business:**

885 LAKE HAVEN RD  
DUNEDIN, FL 34698

**New Principal Place of Business:**

**Current Mailing Address:**

885 LAKE HAVEN RD  
PO BOX 1555  
DUNEDIN, FL 34697 US

**New Mailing Address:**

FEI Number: 59-2062533      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BALDWIN, RICHARD C  
340 HAMMOCK DRIVE  
PALM HARBOR, FL 34683 US

**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: TD ( ) Delete  
Name: BROCK, ROBERT C  
Address: 1287 RANCHWOOD DR E  
City-St-Zip: DUNEDIN, FL 34698

Title: CD ( ) Delete  
Name: BALDWIN, RICHARD C  
Address: 340 HAMMOCK DRIVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: SD ( ) Delete  
Name: WINGER, SCOTT  
Address: 2071 THE MALL  
City-St-Zip: CLEARWATER, FL 33755

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: WEST, CHRISTOPHER  
Address: 2186 EDYTH DR, #1  
City-St-Zip: DUNEDIN, FL 34698

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: ROBERT BROCK

TD

01/07/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date