## 2003 NOT-FOR-PROFIT COMPORATION UNIFORM BUSINESS REPORT (UBR)

## **FILED** Apr 21, 2003 8:00 am Secretary of State

DOCUMENT # 758559  1. Entity Name WESTSIDE CHRUCH OF CHRIST OF PUTNAM COUNTY, INC.									04-03-200	3 901 49	002 ***	*61.25	
210 PENIEL RD PALATKA FL 32177			207 9	Mailing Address 207 STILLWELL AVE PALATKA FL 32177  3. Mailing Address Suite, Apt. #, etc.									
			3. Ma					CHECK HERE IF MAKING CHANGES					
			Sı										
City & State				City & State			4. FEI Number 59-2281364			<b>———</b>	Applied For Not Applicable		
Žip	ip Country		Zip		င	Country		5. Certificate of Sta	atus Desired		8.75 A		
	6. Name	and Address of Curren	t Registers	d Agent		- Name -	مد هجد د	7. Name and Add	ess of New R	gistered A	gent		<del>]</del> -
207 STI	, WILLIAM N	ENUE						O. Box Number is N	ot Acceptable	)			
PALATK	(A FL 32177					City			·	FL	Zip Co	de	
	e named entity ations of regist	y submits this statement i ered agent.	or the purp	ose of changing its	register	ed Office or	registere	d agent, or both, in t	he State of Flor	ida. I am fa	niliar with	and accept	1
SIGNATURE		or printed name of registered ager	s and title if app	plicable. (NOTE	: Registere	d Agent signat	ure required :	when reinstating)	·	DATE			}
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Make Check Payable to Florida Department of State					
10.		OFFICERS AND D	RECTORS		11.		A	DDITIONS/CHANGE	S TO OFFICER	S AND DIRE	CTORS IN		1_
NAME STREET ADDRESS CITY-ST-ZIP	D : Sadler, 211 West Palatka	TOVER CIRCLE		DZ Delete			MUE:	Starling 3 County Ri Stone Her	ood 315 abt=.1	•	□ Change .656	Addition	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NESMITH, 217 CRES PALATKA	TWOOD AVENUE		☐ Delete		ŀ	· ·		<del></del>	·	Change	☐ Addition	25
- TITLE	STD MOORE, V	MELL AVENUE		Delete	NAM STRE	L		Proceedings			☐ Change	Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Defete				·		[	Change	Addition	
				☐ Delete	TITLE					(	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			·		-	ET ADORESS ST-ZIP							
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		information supplied with	·	□ Delete	STREE CITY- TITLE NAME STREE CITY-	ET ADORESS ST-ZIP ET ADORESS ST-ZIP					Change	☐ Addition	

indicated on this report or suppremental 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, withiall other like empowered.

SIGNATURE:

386 · 328 **- 39**78

Daytime Phone #