2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005
Secretary of State

DOCUMENT# 764556

Entity Name: MARINER BOULEVARD CHURCH OF CHRIST, INC.

Current Principal Place of Business:

11025 RIPLEY STREET
P.O. BOX 3503
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

11025 RIPLEY STREET
P.O. BOX 3503
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 59-2868614 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAIRD, WES
2336 LAKE FOREST AVE
SPRING HILL, FL 34609 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:	D	( ) Delete
Name:	JOHNSON, CHARLES D	
Address:	1477 N FAYETTEVILLE DR.	
City-St-Zip:	SPRING HILL, FL	
Title:	DT	( ) Delete
Name:	PERRY, KIM D	
Address:	MARY'S FISH CAMP	
City-St-Zip:	SPRING HILL, FL	
Title:	D	(X) Delete
Name:	MCGEHEE, GUENTELLE,	
Address:	7413 SOUTH PINEHURST DR	
City-St-Zip:	SPRING HILL, FL	
Title:	DS	( ) Delete
Name:	BAIRD, WES DS	
Address:	2336 LAKE FOREST AVE	
City-St-Zip:	SPRING HILL, FL 34609	

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
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: WES BAIRD DS 04/18/2005

Electronic Signature of Signing Officer or Director — Date