

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 27, 2004
Secretary of State**

DOCUMENT# 769321

Entity Name: HARBOR CITY CHURCH-BY-THE-SEA, INC.

Current Principal Place of Business:

399 E EAU GALLIE BLVD.
MELBOURNE, FL 32937

New Principal Place of Business:

Current Mailing Address:

399 E EAU GALLIE BLVD.
MELBOURNE, FL 32937

New Mailing Address:

FEI Number: 59-2299265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUSICK, CAROL H
4735 CAROLWOOD DRIVE
MELBOURNE, FL 32934 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: PT () Delete
Name: CUSICK, JOM
Address: 4735 CAROLWOOD DRIVE
City-St-Zip: MELBOURNE, FL

Title: VT () Delete
Name: CUSICK, CAROL
Address: 4735 CAROLWOOD DRIVE
City-St-Zip: MELBOURNE, FL

Title: ST () Delete
Name: SCHOPKE, NEIL
Address: 165 LANTERBACK ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: CUSICK, JIM
Address: 4735 CAROLWOOD DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: VT (X) Change () Addition
Name: CUSICK, CAROL
Address: 4735 CAROLWOOD DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: ST (X) Change () Addition
Name: SCHOPKE, NEIL
Address: 165 LANTERBACK ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

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: CAROL CUSICK

_____ Electronic Signature of Signing Officer or Director

MRS.

01/27/2004

_____ Date