


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N00000000015	
1. Entity Name Northside Citizen Worship Center Inc	

FILED

03 OCT 17 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1653 Fannin Ave NW Suite, Apt. #, etc.	3. Mailing Address Same Suite, Apt. #, etc.
City & State Palm Bay Florida	City & State
Zip 32907	Country USA

4. FEI Number 59-3615913	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name Joycelyn Mundy	
Street Address (P.O. Box Number is Not Acceptable) 1653 Fannin Ave NW	
City Palm Bay	Zip Code FL 32907

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) **DATE** _____

FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Joycelyn Mundy 1653 Fannin Ave NW Palm Bay FL 32907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	APD Stennet Mundy 1653 Fannin Ave NW Palm Bay FL 32907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400023912394 10/17/03--01081--004 **\$1.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOD Albert Smith 826 Black Coral Ave Palm Bay FL 32907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM Louise Simpson 1556 Glencove Ave Palm Bay FL 32902	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Joan Largie 557 San Filipino Palm Bay FL 32909	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Joycelyn Mundy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037B (12/02)

9/10/21

Northside Citizen Worship Center, Inc.
1653 Fannin Ave NW
Palm Bay FL 32907

October 14 , 2003

Division of Corporation
PO Box 6227
Tallahassee, FL 32314

RE: UBR for Northside Citizen Worship Center, Inc.

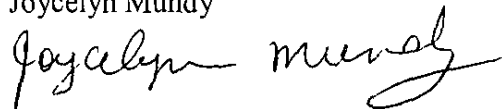
To Whom It May Concern:

Please find enclosed a check in the amount of \$~~60.25~~ and information for my Uniform Business Report. I respectfully request your forbearance for my late filing, but I never received a reminder for my annual report.

I thank you for your help in this matter.

Very truly yours,

Joycelyn Mundy

A handwritten signature in cursive script, appearing to read "Joycelyn Mundy", written in black ink.