

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000001860

**FILED**  
**Sep 02, 2004**  
**Secretary of State****Entity Name:** CITRUS RIDGE BIBLE CHURCH, INC.**Current Principal Place of Business:**POST OFFICE BOX 640483  
BEVERLY HILLS, FL 344640483**New Principal Place of Business:****Current Mailing Address:**POST OFFICE BOX 640483  
BEVERLY HILLS, FL 344640483**New Mailing Address:****FEI Number:** 59-3624554**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PONDS, JOSEPH R JR  
2171 W PINE RIDGE BLVD  
BEVERLY HILLS, FL 34464 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:** PD ( ) Delete  
**Name:** SPENCER, MARLOWE  
**Address:** 850 W BUTTON BUSH DR  
**City-St-Zip:** BEVERLY HILLS, FL 34465**Title:** TD ( ) Delete  
**Name:** THOMAS, JOLETTE  
**Address:** 2171 W PINE RIDGE BLVD  
**City-St-Zip:** BEVERLY HILLS, FL 34465**Title:** SD ( ) Delete  
**Name:** WRIGHT, BRENDA  
**Address:** 4832 N BAYWOOD DR  
**City-St-Zip:** BEVERLY HILLS, FL 34465**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:**

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: JOLETTE THOMAS

TREA

09/02/2004

Electronic Signature of Signing Officer or Director

Date