2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001939

FILED Jan 08, 2005 Secretary of State

Entity Name: SOUTH PUTNAM CHRISTIAN SERVICE CENTER, INC.

New Principal Place of Business: Current Principal Place of Business: 223 N SUMMIT ST CRESCENT CITY, FL 32112 **Current Mailing Address: New Mailing Address:** PO BOX 744 CRESCENT CITY, FL 32112 FEI Number: 59-3638033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIETRICH, CHAMPAGNIE J 223 N SUMMIT ST CRESCENT CITY, FL 32112 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CHAMPAGNIE, DIETRICH J Name: Name: 223 N SUMMIT ST Address: Address: City-St-Zip: CRESCENT CITY, FL 32112 City-St-Zip: Title: VD Title: () Delete () Change () Addition WILLIAMS, JOHN Name: Name: Address: PO BOX 494 Address: City-St-Zip: CRESCENT CITY, FL 32112 City-St-Zip: Title: () Delete Title: PD (X) Change () Addition DECHAINE, PRISCILLA Name: DECHAINE, PRISCILLA Name: Address: P O BOX 568 Address: P O BOX 568 City-St-Zip: WELAKA CITY, FL 32193 City-St-Zip: WELAKA CITY, FL 32193 Title: TD () Delete Title: (X) Change () Addition FREDRICK, JEANNIE Name: Name: FREDRICK, JEANNIE 199 CHESNUT STREET 199 CHESNUT STREET Address: Address: CRESCENT CITY, FL 32112 City-St-Zip: CRESCENT CITY, FL 32112 City-St-Zip: Title: () Delete Title: (X) Change () Addition GOOLSBY, DEE HAGEDORN, BRANDT E MR Name: Name: 223 N SUMMIT STREET 98 LAKE GROVE DRIVE Address: Address: City-St-Zip: CRESCENT CITY, FL 32112 City-St-Zip: CRESCENT CITY, FL 32112 Title: () Delete Title: () Change (X) Addition MILLER, KITTY Name: Name: Address: Address: 1541 CR 309 GEORGETOWN, FL 32139 City-St-Zip: 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: BRANDT E HAGEDORN TD 01/08/2005