


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90008 034 ****61.25

DOCUMENT # N00000007732					
1. Entity Name APOLOGETICS, INC.					
Principal Place of Business 1957 SOURWOOD BLVD. DUNEDIN, FL 34698			Mailing Address 1957 SOURWOOD BLVD. DUNEDIN, FL 34698		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3704883	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WOODWARD, THOMAS E 1957 SOURWOOD BLVD. DUNEDIN, FL-34698				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small> DATE _____					
Filing Fee is \$61.25 Due by September 8, 2004		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	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CODD, JOHN E		NAME		
STREET ADDRESS	2942 MANDARIN HOLLOW DR.		STREET ADDRESS	27 Misty Grove Circle	
CITY-ST-ZIP	JACKSONVILLE, FL 32217		CITY-ST-ZIP	The Woodlands, TX 77380	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCCULLOUGH, JAMES B		NAME		
STREET ADDRESS	21 IDLEWILD ST.		STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER BCH, FL 33767		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMITZ, DONALD		NAME		
STREET ADDRESS	2501 LAURELWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	VALRICO, FL 33594		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMITZ, NANCY		NAME		
STREET ADDRESS	2501 LAURELWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	VALRICO, FL 33594		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TSAMIS, WILLIAM		NAME		
STREET ADDRESS	1292 RALEIGH CT.		STREET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS, FL 34689		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WOODWARD, THOMAS E		NAME	P/C	
STREET ADDRESS	1957 SOURWOOD BLVD.		STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN, FL 34698		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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Thomas E. Woodward</i>		Date: <i>July 7, 2004</i>		Daytime Phone #: <i>727-642-8574</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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07062004 Chg-NP CR2E037 (10/03)

Attachments
N0000007732

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Apologetics, Inc.
d/b/a C. S. Lewis Society
FEI 59-3704883
Officer/Director Additions
2004 Not-For-Profit Annual Report

Title	V
Name	Richard Akin
Street Address	2338 Stag Run Blvd
City-St-Zip	Clearwater, FL 33765

Title	D
Name	Jim Avery
Street Address	1250 Broadway - 7 th Floor
City-St-Zip	New York, NY 10001

Title	D
Name	Pat Halpin
Street Address	3230 Maple St. NE
City-St-Zip	St. Petersburg, FL 33704

Title	D
Name	Jim Larsen
Street Address	1640 Midnight Pass Way
City-St-Zip	Clearwater, FL 33755

Title	D
Name	Jo Anne Larsen
Street Address	1640 Midnight Pass Way
City-St-Zip	Clearwater, FL 33755

Title	D
Name	Dudley Salley
Street Address	203 East Valley Road
City-St-Zip	Rome, GA 30161