## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 24, 2004 8:00 am Secretary of State

1. Entity Nam	MENT # N00590 BAPTIST CHURCH OF MON	ITVERDE, INC.				05-24-2004	4 90003 016 ****	61.25
Principal Place 16124 COUN MONTVERDE	ITY RD 455	Mailing Address PO BOX 560358 MONTVERDE, FL 34756	S US				5405	5385
0.0:::::10	1	10.41.77						
2. Principal Pi	lace of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			03042003 Ch	g-NP	CR2E037 (10/03)	
City & State		City-& State			4. FEI Number 59-242723	 3	— — — — — — — — — — — — — — — — — — —	plied For
Zip	Country	Zip	Country		5. Certificate of Sta		□ \$8.75 Add	
	6. Name and Address of Current I	Registered Agent		<del></del> ,	7. Name and Addi	ess of New Re	Fee Require	d
17115 FRA	CHARLES B. ANKLIN ST RDE, FL 34756		Street A	lichar	d Dex O. Box Number is N Villard Au	lot Acceptable)		9 7 /
	named entity submits this statement for ions of registered agent.  Ruhal Deg Signature, typed or printed name of registered agents.	The s	egistered office o Registered Agent signat			he State of Flor	ida. I am familiar with,	and accept
· Di	Filing Fee is \$61.25 ue by September 8, 2004	9. Election Camp Trust Fund Co			55.00 May Be added to Fees		ake check payable to da Department of Si	
10.	OFFICERS AND DIR		11.	AD			S AND DIRECTORS IN	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	HURLEY, CHARLES B. 17115 FRANLKIN MONTVERDE, FL	Quelete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ric 310		exter	⊠ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MCROBERTS, DAVID 18500 TRIPLE E. RD. CLERMONT, FL 34711	<b>D</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tres Hu 171		thin_	☑ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCROBERTS, DAVID 18500 TRIPLE E RD CLERMONT, FL 34711	<b>Ø</b> N⊃elete	TITLE NAME STREET ADDRESS CITY-ST-ŽIP		stee 155 Lus 629 Mo	Ĺ	□ Change ide Dr. 34756	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCARBORO, KAYTON 18334 WESTSHORE LANE GROVELAND, FL 34736	<b>⊠</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		mbo Par 305 Pa noverole	Jan 6/17	□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S . MCROBERTS, JOYCE 18500 TRIPLE E RD CLERMONT, FL 34711	<b>Æ</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	D RODGERS, JERRY 9152 FOREST HILL DR. CLERMONT, FL 34711 sertify that the information supplied with	Delete This filing does not qualify for t	NAME STREET ADDRESS CITY-ST-ZIP	ted in Secti	ion 119.07(3)(i). Flo	rida Statutes I	☐ Change	Addition
indicated	certify that the information supplied with on this report or supplemental report is	true and accurate and that my	/ signature shall h	have the sai	me legal effect as if	made under or	ath; that I am an officer	or director

of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered.

SI	G	N.	Δ٦	Ш	R	F.	

Ruh	ard

Rubash Deither
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/21/04

352-250-4/9/ Daytime Phone #