2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004
Secretary of State

DOCUMENT# N01000001244

Entity Name: THE JOURNEY FELLOWSHIP OF OCALA, INC.

Current Principal Place of Business:

2240 SW HWY 484
OCALA, FL 34473

New Principal Place of Business:

1 N.E. 1ST AVENUE
SUITE 210
OCALA, FL 34478

Current Mailing Address:

P.O. BOX 1954
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-3739836 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WHITESIDE, RICHARD
2901 SW 41ST STREET
OCALA, FL 34474 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: D ( ) Delete
Name: WHITESIDE, RICHARD C
Address: 2240 SW HWY 484
City-St-Zip: OCALA, FL 34473

Title: D ( ) Delete
Name: ARRIETTO, ROBERT
Address: 2240 SW HWY 484
City-St-Zip: OCALA, FL 34473

Title: D ( ) Delete
Name: HADLOCK, DAWN
Address: 2240 SW HWY 484
City-St-Zip: OCALA, FL 34473

Title: D ( ) Delete
Name: BARBOUR, LOIS A
Address: 2240 SW HWY 484
City-St-Zip: OCALA, FL 34473

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:

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: RICHARD C. WHITESIDE D 04/05/2004
Electronic Signature of Signing Officer or Director — Date