2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jun 01, 2005 8:00 am Secretary of State

DOCUMENT # N0100001244 1. Entity Name THE JOURNEY FELLOWSHIP OF OCALA, INC.							-01-2005 9		0 ****61	.25	
Principal Place of Business 1 N.E. 1ST AVENUE SUITE 210 OCALA, FL 34478			Mailing Address P.O. BOX 1954 OCALA, FL 34478				IFII 30 111 60 111 60 111		ITE ALBA GIGA BIB		
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				05172005 Ch	g-NP	CR2E03	7 (10/03)		
City & State		City & State				4. FEI Number 59-3739830	6) 	plied For t Applicable	
Zip		Country	Zip		Country		5. Certificate of Sta			\$8.75 Add Fee Required	
	6. Name	and Address of Curren	t Registered A	<u>gent</u>			7. Name and Addr	ess of New Re	egistered A	Agent	
WHITESID	E DICHA	\PD			Namo	* Rick	nard W	niterido)		
2901 SW 4				Strept Address			R.O. Box Number is N	lot-Acceptable)		
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		ty submits this statement itered agent.	for the purpose	of changing its re	egistered office	or register	ed agent, or both, in t	the State of Flo	rida. Lam	familiar with,	and accept
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SIGNATURE NICHORCE WHITESTEE STITZED											
	Signature, typed	1 or printed name of registered age	ant and title if applicable	le. (NOTE:	Registered Agent sig	pature required	when reinstating)	, , , , , , , , , , , , , , , , , , ,	DATE		
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indicated on this report or suppliemental 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 to the receiver or frustee 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Designed Florida Statutes, 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.