

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002653

FILED
Aug 10, 2004
Secretary of State**Entity Name:** PALM CITY CHURCH OF CHRIST, INC.**Current Principal Place of Business:**3555 MAPP ROAD
PALM CITY, FL 34990**New Principal Place of Business:****Current Mailing Address:**P O BOX 2418
PALM CITY, FL 34991**New Mailing Address:****FEI Number:** 43-1959432**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KOHL, N D ESQ
50 S.E. KINDRED STREET
SUITE 107
STUART, FL 34994 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: SPIELES, MIKE
Address: P O BOX 2418
City-St-Zip: PALM CITY, FL 34991

Title: D () Delete
Name: SPIELES, BRIAN
Address: 2621 S W ESTELLA TER
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: PHIFER, ERIC
Address: 133 SE ASHLEY OAKS WAY
City-St-Zip: STUART, FL 34991

Title: D () Delete
Name: COLLINS, JIM
Address: 1454 S W SEAGULL WAY
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: SMITH, JERRY
Address: 4114 S W GLENEAGLE CIR
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Delete
Name: MCQUINN, LES
Address: 11169 S E SEA PINES CIR
City-St-Zip: HOBE SOUND, FL 33455

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: D (X) Change () Addition
Name: CROCKER, RONNIE
Address: 10820 S E SEA PINES CIRCLE
City-St-Zip: HOBE SOUND, FL 33455

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: ERIC PHIFER

D

08/10/2004

Electronic Signature of Signing Officer or Director

Date