

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90163 020 ****70.00

DOCUMENT # N02000006601

1. Entity Name
CHURCH OF CHRIST NORTH SIDE, INC.



Principal Place of Business
**4019 NW 6TH STREET
GAINESVILLE FL 32609**

Mailing Address
**1034 SE 12TH AVENUE
GAINESVILLE FL 32641**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



CHECK HERE IF MAKING CHANGES

4. FEI Number

01-0759349

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RUSHING, JR., ULYSEES
1034 SE 12TH AVENUE
GAINESVILLE FL 32641**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P/C/T	Ulysees Rushing Jr	1034 SE 12th Ave	Gainesville FL 32641	<input type="checkbox"/>	<input type="checkbox"/>
M/D	C.D. Hall	4505 SE 2nd Pl	Gainesville FL 32641	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Raymond G. Simmons	1216 S.E. 13th St	Gainesville FL 32641	<input type="checkbox"/>	<input type="checkbox"/>
D/AT	Michael Harry	255 43rd St	Gainesville FL 32641	<input type="checkbox"/>	<input type="checkbox"/>
D/AT	Delano Filor	2401 NW 58th Ave	Gainesville FL 32653	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S	Ulysees E. Rushing III	1216 SE 13th St	Gainesville FL 32641	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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:

Signature Required

3-7-03

352 373 7850

CR2E037 (10/02)