

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002735

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: PLEASANT GROVE OUTREACH MISSION CORP.

**Current Principal Place of Business:**

716 VAN BUREN STREET  
JACKSONVILL, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 12074  
JACKSONVILLE, FL 32209

**New Mailing Address:**

FEI Number: 51-0456273

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DC FINANCIAL SOLUTIONS, INC.  
1236 S. MC DUFF AVENUE, #109  
JACKSONVILLE, FL 32205

**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: P ( ) Delete  
Name: O'NEAL, JANICE  
Address: 1486 STIMSON  
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP ( ) Delete  
Name: MARTIN, PATRICIA ANN  
Address: 1338 HIGH PLAINS DRIVE  
City-St-Zip: JACKSONVILLE, DL 32218

Title: S ( ) Delete  
Name: BROWN, WANDA  
Address: 3518 ANDREWS STREET  
City-St-Zip: JACKSONVILLE, FL 32254

Title: D ( ) Delete  
Name: BROWN, DENNIS  
Address: 3518 ANDREWS STREET  
City-St-Zip: JACKSONVILLE, FL 32254

Title: D ( ) Delete  
Name: WALKER, MICHAEL  
Address: 4550 W. BIDDY LANE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: HALL, LAMAR  
Address: 5152 ROLLINS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32207

**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:

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: JANICE O'NEAL

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date