

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003049

FILED
Jan 10, 2004
Secretary of State

Entity Name: HEART OF CHRIST CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

3202 CLEWISTON ST.
DELTONA, FL 32725

New Principal Place of Business:

38 S. SHELL ROAD
DEBARY, FL 32713

Current Mailing Address:

3202 CLEWISTON ST.
DELTONA, FL 32725

New Mailing Address:

FEI Number: 74-3088933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEVENS, RICHARD L
3202 CLEWISTON ST.
DELTONA, FL 32725

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS. () Change (X) Addition
Name: STEVENS, MARY J S
Address: 3202 CLEWISTON ST.
City-St-Zip: DELTONA, FL 32738

Title: MR. () Change (X) Addition
Name: STEVENS, RICHARD L D
Address: 3202 CLEWISTON ST.
City-St-Zip: DELTONA, FL 32738

Title: MR () Change (X) Addition
Name: WALTER, JANES P C
Address: 3135 TELFORD LANE
City-St-Zip: DELTONA, FL 32738

Title: MRS () Change (X) Addition
Name: WALTER, LYNNE T
Address: 3135 TELFORD LANE
City-St-Zip: DELTONA, FL 32738

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: MARY JANE STEVENS

S.

01/10/2004

Electronic Signature of Signing Officer or Director

Date