2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004480

FILED Apr 30, 2004 Secretary of State

Entity Name: ANTIOCH FELLOWSHIP BAPTIST CHURCH, INC.

Current Principal Place of Business:		New Principal Place of Business:	
370 GALLUP R SPRING HILL, F			
Current Mailing	g Address:	New Mailing Address:	
370 GALLUP R SPRING HILL, F			
El Number: 71-09	06543 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
lame and Addı	ress of Current Registered Agent:	Name and Address of New Registered Agent:	
$M \cap K \cap K \cap V \cap V$	ALIGHNI E		
412 FORELOC ARPON SPRIN	CKRD NGS, FL 34688 US	purpose of changing its registered office or registered agent, or both	
412 FORELOC ARPON SPRIN The above name In the State of Flo	CK RD NGS, FL 34688 US ed entity submits this statement for the	purpose of changing its registered office or registered agent, or both	
412 FORELOC ARPON SPRIN The above name on the State of Flo	CK RD NGS, FL 34688 US ed entity submits this statement for the orida.		
412 FORELOC ARPON SPRIN The above name In the State of Floor BIGNATURE:	CK RD NGS, FL 34688 US ed entity submits this statement for the orida. Electronic Signature of Registered Ag	gent Date	
n the State of Flo SIGNATURE: _	CK RD NGS, FL 34688 US ed entity submits this statement for the orida.		
412 FORELOC ARPON SPRIN The above name In the State of Flo SIGNATURE: DFFICERS AND ittle: lame: ddress:	CK RD NGS, FL 34688 US ed entity submits this statement for the orida. Electronic Signature of Registered Ag	gent Date	
412 FORELOC ARPON SPRIN The above name In the State of Floor BIGNATURE:	CK RD NGS, FL 34688 US ed entity submits this statement for the orida. Electronic Signature of Registered Ago DIRECTORS:	pent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: PRES () Change (X) Addition Name: MCNARY, LA VAUGHN E Address: 3412 FORELOCK RD.	

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: LAVAUGHN MCNARY PRES 04/30/2004