## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # N03000009330** 04-26-2004 90987 017 \*\*\*\*70 00 BRADFORD COUNTY FAITH COMMUNITY CENTER, INC. Principal Place of Business Mailing Address P.O. BOX 101 P.O. BOX 101 STARKE, FL 32091 STARKE, FL 32091 2. Principal Place of Business 3. Mailing Address 730 old Lawky Rds Suite, Apt. #, etc. Suite, Apt. #, etc. 04212004 CR2E037 (10/03) Chg-NP Applied For City & State City & State 4. FEI Number Starke Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent lames E Mcknight MCKNIGHT, JAMES E JR. 2514 NE 56TH TERR. 65Th Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE, FL 32609 Zio Code 32409 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to 12 Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2004 Florida Department of State Added to Fees 10. **OFFICERS AND DIRECTORS** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ecretary PD \* TITLE ☐ Delete TITLE Change ■ Addition Nekia Iones 3752 NE 77th Ave. MCKNIGHT, JAMES E JR. MARKE NAME STREET ADDRESS 2514 NE 56TH TERR. STREET ADDRESS Gainesville FL. 32409 CITY-ST-ZIP GAINESVILLE, FL 32609 CITY-ST-ZIP VD TITLE ☐ Delete TITLE Member Change Addition SLOCUM, ELAINE NAME Winefred Majors NAME STREET ADDRESS **PO BOX 81** STREET ADDRESS P.O BOX 371 LAWTEY, FL 32627 CITY-ST-7IP CITY-ST-7IP Lawtey" Delete TITLE Change ☐ Addition TITLE ANDERSON, PAMELA NAME NAME STREET ADDRESS P.O. BOX 5134 STREET ADDRESS GAINESVILLE, FL 32627 CITY-ST-ZIF CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition CUMMINGS, DWAYNE NAME NAME 2177NE 10TH AVE. STREET ADDRESS STREET ADDRESS LAWTEY, FL 32058 CITY-SY-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 attaching with an address, with all other life 372-373.735 4-21-2004 SIGNATURE:

FILED

James E.