


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 02, 2004 8:00 am
Secretary of State

06-02-2004 90001 029 ****61.25

DOCUMENT # N04000000164		
1. Entity Name CHURCH OF TODAY OF THE NATURE COAST, INC.		

Principal Place of Business 4035 N. RINGWOOD CIR. HERNANDO FL 34442	Mailing Address 4035 N. RINGWOOD CIR. HERNANDO FL 34442
---	---

54056322



MOORE CR2E037 (11/03)

2. Principal Place of Business 2021 N.W. 13TH ST.	3. Mailing Address 2021 N.W. 13TH ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State CRYSTAL RIVER, FL	City & State CRYSTAL RIVER, FL
Zip 34428	Zip 34428
Country CITRUS	Country CITRUS

4. FEI Number FIN-80-0094740	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MILLER, MARY L 4035 N. RINGWOOD CIR. HERNANDO FL 34442	
--	--

7. Name and Address of New Registered Agent	
Name Mrs. GAIL KOSTELNICK	
Street Address (P.O. Box Number is Not Acceptable) 2021 N.W. 13TH ST.	
City CRYSTAL RIVER FL	Zip Code 34428

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 <i>Gail Kostelnick</i>	DATE 5/01/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$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 REG. AGENT	<input checked="" type="checkbox"/> Delete	TITLE REG. AGENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME MARY MILLER		NAME GAIL KOSTELNICK	
STREET ADDRESS 4035 N RINGWOOD CIRCLE		STREET ADDRESS 2021 N.W. 13TH ST.	
CITY-ST-ZIP HERNANDO, FL 34442		CITY-ST-ZIP CRYSTAL RIVER, FL. 34428	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 attachment with an address, with all other like empowered.	
SIGNATURE: <i>Jesse Kaufman</i>	JESSE KAUFMAN 05-01-04 (352) 228-0535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

Attachment

54056322

NO4000000164

CHURCH OF TODAY
2021 N. W. 13TH ST.
CRYSTAL RIVER, FL. 34428

MAY 01, 2004

DIVISION OF CORPORATIONS
ANNUAL REPORT SECTION
P.O. BOX 6850
TALLAHASSEE, FL. 32314

SIRS or MADAM

Since the Corporation Papers were not filed until the last week in Dec., 2003, there was no financial report made for the year of 2003.

Sincerely,


JESSEE KAUFFMAN