

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

DOCUMENT# N05820

**FILED**  
**Apr 27, 2004**  
**Secretary of State**

**Entity Name:** FAITH ASSEMBLY CHRISTIAN CHURCH OF MIRAMAR BEACH, INC.

**Current Principal Place of Business:**

306 GERONIMO  
DESTIN, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1536  
SANTA ROSA BCH., FL 32459

**New Mailing Address:**

**FEI Number:** 59-2936244      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ARNETT, TOY R., JR.  
306 SO. GERONIMO STREET  
DESTIN, FL 32550    US

**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: PD      ( ) Delete  
Name: ARNETT, TOY R., JR.,  
Address: 306 SO.GERONIMO ST  
City-St-Zip: DESTIN, FL 32550

Title: VD      ( ) Delete  
Name: ARNETT, RENA  
Address: 306 SO. GERONIMO STREET  
City-St-Zip: DESTIN, FL 32550

Title: D      ( ) Delete  
Name: NESIUS, SHANNON  
Address: 320 SANDMYRTLE TR  
City-St-Zip: DESTIN, FL 32541

**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:

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: TOY R. ARNETT, JR.

PD

04/27/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date