

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07231

FILED
Jul 16, 2004
Secretary of State**Entity Name:** THE SOUTHEAST CONFERENCE, CHURCH OF THE UNITED BRETHREN IN CHRIST, INC.**Current Principal Place of Business:**560 FLOMICH AVE
HOLLY HILL, FL 32117 US**New Principal Place of Business:****Current Mailing Address:**560 FLOMICH AVE
HOLLY HILL, FL 32117 US**New Mailing Address:****FEI Number:** 59-2640149**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MC KEOWN, ROBERT CHARLES
1650 CENTER AVENUE
HOLLY HILL, FL 32117 US**Name and Address of New Registered Agent:**MCKEOWN, ROBERT CHARLES
1650 CENTER AVENUE
HOLLY HILL, FL 32117 US

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: ROBERT C. MCKEOWN

07/16/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DPD () Delete
Name: MC KEOWN, ROBERT CHARLES
Address: 1650 CENTER AVENUE
City-St-Zip: HOLLY HILL, FL 32117**Title:** DS () Delete
Name: ROWE, DENNIS
Address: 4700 CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32117**Title:** T () Delete
Name: HULL, GWEN
Address: 1608 RIVERSIDE DR
City-St-Zip: HOLL HILL, FL 32117**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DPD (X) Change () Addition
Name: MCKEOWN, ROBERT CHARLES
Address: 1650 CENTER AVENUE
City-St-Zip: HOLLY HILL, FL 32117**Title:** DS (X) Change () Addition
Name: MCQUILLEN, KYLE
Address: 299 CAFA GRANDE
City-St-Zip: EDGEWATER, FL 32141**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: ROBERT C. MCKEOWN

DPD

07/16/2004

Electronic Signature of Signing Officer or Director

Date