2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18962

FILED Apr 28, 2004 Secretary of State

Entity Name: MOULTRIE BAPTIST CHURCH, INC. OF ST. AUGUSTINE, FLORIDA

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
3699 U.S. ST. AUGU	1, SOUTH STINE, FL 32086				
Current Mailing Address:			New Maili	New Mailing Address:	
3699 U.S. ST. AUGU	1, SOUTH STINE, FL 32086				
FEI Number:	: 59-2388804 FEI N	lumber Applied For()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of Curren	t Registered Agent:	Name and	Address of New Registered Agent:	
ARMENTA 3699 US 1 SAINT AUG					
	named entity submit e of Florida.	s this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,	
SIGNATUF		nature of Registered Age	+	Data	
OFFIGER(ŭ	3		Date	
OFFICERS	S AND DIRECTORS	•	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (X) Delete ARMENTA, JOHN 3316 WOODBURY CT SAINT AUGUSTINE, FL	32086	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete HARRIS, GEORGE 1015 ALTARA AVE SAINT AUGUSTINE, FL	32086	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PD () Delete CHAPMAN, JOHN 4212 OAK LANE SAINT AUGUSTINE, FL	32086	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WOLFE, DONALD 712 CAMELIA TRAIL SAINT AUGUSTINE, FL 32086	
Title: Name: Address: City-St-Zip:	VP (X) Delete BRADDOCK, RALPH 5425 DATIL PEPPER F SAINT AUGUSTINE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MARSHALL, DANA 287 TWIN FOX TRAIL SAINT AUGUSTINE, FL	32086	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () Delete NIX, KAY 4255 REGINA ST		Title: Name: Address:	() Change () Addition	

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: GEORGE HARRIS D 04/28/2004