

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N44636

FILED
Jan 21, 2003
Secretary of State

Entity Name: STARRATT ROAD CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

2311 STARRATT ROAD
JACKSONVILLE, FL 32226

New Principal Place of Business:

Current Mailing Address:

2311 STARRATT ROAD
JACKSONVILLE, FL 32226

New Mailing Address:

FEI Number: 59-3080552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMILLAN, ALLAN J.
2311 STARRAT RD.
JACKSONVILLE, FL 32226 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: MCMILLAN, ALLAN J.,
Address: 519 BAISDEN ROAD
City-St-Zip: JACKSONVILLE, FL

Title: STD () Delete
Name: GOOD, DAVID R.
Address: 10959 TRACI LYNN DR.
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD () Delete
Name: MUNIZ, LUIS A.,
Address: 11444 HOBART BLVD.
City-St-Zip: JACKSONVILLE, FL

Title: VTD () Delete
Name: PAUL, JOHN W.,
Address: 2176 WATERBLUFF DRIVE
City-St-Zip: JACKSONVILLE, FL

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:

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: ALLAN J. MCMILLAN

PD

01/21/2003

Electronic Signature of Signing Officer or Director

_____ Date