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

Apr 22, 2004 8:00 am Secretary of State DOCUMENT # N46174 1. Entity Name 04-22-2004 90037 043 ****70.00 NEW CONGREGATIONAL METHODIST CHURCH, GENERAL ASSEMBLY, INC. Principal Place of Business Mailing Address 17707 CR 125 N GLEN ST. MARY FL 32040 17707 CR 125 N GLEN ST. MARY FL 32040 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-3134486 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YARBROUGH, ELDER J Street Address (P.O. Box Number is Not Acceptable) 17707 CR 125 NORTH GLEN ST. MARY FL 32040 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Due By May 1, 2004 Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Change Addition WHITEHEAD, JERRY NAME NAME 23507 NW CR 235 STREET ADDRESS STREET ADDRESS LAKE BUTLER FL 32054 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SURRENCY, JAMES NAME NAME 2495 ANBRO STREET STREET ADDRESS STREET ADDRESS WAYCROSS GA 31501 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete ☐ Change ☐ Addition Rocky 1. 5mith DAVIS, LESLIE NAME NAME 10229 BERTIE DAVIS CIR. STREET ADDRESS STREET ADDRESS Glex St MARY, FL. 32040 SANDERSON FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition O'STEEN, JAMES NAME NAME 8447 OSTEEN ROAD STREET ADDRESS STREET ADDRESS GLEN SAINT MARY FL 32040 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Enid y Lupton 17455 CR125 N Glen St MARY, 1 Change Addition OIKES, ENID Y NAME NAME 17655 CR 125 NORTH STREET ADDRESS STREET ADDRESS GLEN SAINT MARY FL 32040 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition YARBROUGH, JOHN W NAME NAME 17707 CR 125 NORTH STREET ADDRESS STREET ADDRESS GLEN SAINT MARY FL 32040 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 receive/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:

ER OR DIRECTOR

FILED