

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2003 8:00 am
Secretary of State

03-25-2003 90071 045 ****61.25

DOCUMENT # **N94000003577**

1. Entity Name

~~THE OCEANSIDE EVANGELICAL FREE CHURCH OF SATELLITE BEACH, FLORIDA, INCORPORATED~~

OCEANSIDE COMMUNITY CHURCH OF SATELLITE BEACH, FLORIDA, INCORPORATED

Principal Place of Business

Mailing Address

305 CASSIA BLVD.
SATELLITE BEACH FL 32937

P.O. BOX 372364
SATELLITE BEACH FL 32937
US



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1876276**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROWLAND, CHARLES R
2701 BARROW ROAD
MERRITT ISLAND FL 32952

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City _____ FL 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 Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

PAID CHECK # 4556, 3-20-03

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	ROWLAND, CHARLES R	
STREET ADDRESS	2701 BARROW DRIVE	
CITY-ST-ZIP	MERRITT ISLAND FL 32952	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAYMOND, HANK	
STREET ADDRESS	422 DOVE LANE	
CITY-ST-ZIP	SATELLITE BEACH FL 32937	
TITLE	D	<input type="checkbox"/> Delete
NAME	FRAZIER, JESSE	
STREET ADDRESS	320 GLENWOOD AVE	
CITY-ST-ZIP	SATELLITE BEACH FL 32937	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHASE, CHARLES	
STREET ADDRESS	6928-D SONNY DALE DR	
CITY-ST-ZIP	MELBOURNE FL 32904	
TITLE	TD	<input type="checkbox"/> Delete
NAME	DUNCAN, LEONARD	
STREET ADDRESS	3972 SNOWY EGRET DR	
CITY-ST-ZIP	MELBOURNE FL 32904	
TITLE	D	<input type="checkbox"/> Delete
NAME	NARVAEZ, BEN	
STREET ADDRESS	1775 CRANE CREEK BLVD	
CITY-ST-ZIP	MELBOURNE FL 32940	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 receiver 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: *Hank Raymond* HANK RAYMOND

3/20/03

777-1658

CR2E037 (10/02)