

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001711

FILED  
Sep 01, 2004  
Secretary of State

**Entity Name:** HOMESTEAD CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

194 N.W. 3RD STREET  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

HOMESTEAD CHRISTIAN CENTER, INC.  
26223 SW 122ND PL  
PRINCETON, FL 33032

**New Mailing Address:**

**FEI Number:** 65-0664003      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KELLY, LEVI REV  
26223 S.W. 122ND PLACE  
HOMESTEAD, FL 33032      US

**Name and Address of New Registered Agent:**

KELLY, LEVI REV  
26223 S.W. 122ND PLACE  
PRINCETON, FL 33032      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: LEVI KELLY

09/01/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: KELLY, LEVI REV  
Address: 26223 S.W. 122TH PLACE  
City-St-Zip: HOMESTEAD, FL 33032

Title: ST      ( ) Delete  
Name: HARRIS, AVIS  
Address: 15853 FAIRWAY HEIGHTS  
City-St-Zip: MIAMI, FL

Title: T      ( ) Delete  
Name: CASTILLO, NOEL  
Address: 29000 S.W. 144 AVENUE  
City-St-Zip: HOMESTEAD, FL 33033

**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:

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: AVIS HARRIS

ST

09/01/2004

Electronic Signature of Signing Officer or Director

Date