

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003361

FILED
Aug 05, 2004
Secretary of State**Entity Name:** BUELAH LAND CHRISTIAN CENTER, CHURCH OF GOD IN CHRIST, INC.**Current Principal Place of Business:**C/O NORMAN RAIFORD
8628 DOVERBROOK DR.
PALM BEACH GARDENS, FL 33410**New Principal Place of Business:****Current Mailing Address:**C/O NORMAN RAIFORD
8628 DOVERBROOK DR.
PALM BEACH GARDENS, FL 33410**New Mailing Address:****FEI Number:** 31-1565118**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**RAIFORD, NORMAN
8628 DOVERBROOK DR.
PALM BEACH GARDENS, FL 33410**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: RAIFORD, NORMAN
Address: 8628 DOVERBROOK DR.
City-St-Zip: PALM BEACH GARDENS, FL 33410**Title:** D () Delete
Name: COLEMAN, RONNIE
Address: 344 DATE PALM DR.
City-St-Zip: LAKE PARK, FL 33403**Title:** D () Delete
Name: LEWIS, JERRY
Address: 1348 N. MAGNOLIA DR.
City-St-Zip: WEST PALM BEACH, FL 33401**Title:** VD () Delete
Name: RAIFORD, NORMAN A II
Address: 1101 W 1ST STREET
City-St-Zip: RIVIERA BEACH, FL 33404**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: NORMAN RAIFORD

PD

08/05/2004

Electronic Signature of Signing Officer or Director

Date