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

nt with an address, with all other like e

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachme

SIGNATURE:

## Apr 20, 2004 8:00 am Secretary of State DOCUMENT # N96000005002 1. Entity Name 04-20-2004 90027 041 \*\*\*\*61.25 THE CHURCH OF CHRIST AT BEVERLY SHORES, INC. Mailing Address Principal Place of Business 1318 WEST GRIFFIN ROAD 1318 WEST GRIFFIN ROAD LEESBURG FL 34748 LEESBURG FL 34748 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-1996589 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DILLINGER, AUSTIN C JR. Street Address (P.O. Box Number is Not Acceptable) 7206 PALM AVENUE LEESBURG FL 34788 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition Change TITLE ☐ Delete TITLE LARRY DAVES YOPP, JAMES D S.E. 174th St NAME NAME 35225 QUEENS WAY STREET ADDRESS STREET ADDRESS Summer Field FRUITLAND PARK FL 34731 34491 CITY-ST-ZIP CITY-ST-7IP Addition Change TITLE ☐ Delete TITLE HUBBELL, LELAND NAME NAME 800 MAPLE AVENUE STREET ADDRESS STREET ADDRESS FRUITLAND PARK FL:34731。 方式的复数 电压力 中 CITY-ST-ZIP CITY-ST-21P. SD Delete TITLE ☐ Change Addition TITLE DILLINGER, AUSTIN C JR. NA ME NAME 7206 PALM AVENUE STREET ADDRESS STREET ADDRESS LEESBURG FL 34788 CITY-ST-ZIP CITY-ST-ZIP VPD Change ☐ Addition TITLE ☐ Delete TITLE IRWIN, ALAN NAME 36765 SHADOW HILL DR STREET ADDRESS STREET ADDRESS FRUITLAND PARK FL 34731 CITY-ST-ZIP CITY-ST-ZIF ☐ Delete ☐ Change Addition TITLE TITLE CLARK, GEORGE J SR. NAME NAME 1021 MELLATHON CIRCLE STREET ADDRESS STREET ADDRESS LEESBURG FL 34748 CITY-ST-ZIP CITY - ST - ZIP Delete Change ` Addition TITLE TITLE HOWELL, HUBERT JEAN NAME NAME 306 DOGWOOD LANE STREET ADDRESS STREET ADDRESS LADY LAKE FL 32159 CITY-ST-ZIP CITY-ST-7IP 12. Thereby 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 of 7. Florida Statutes; and that my name appears in Block 10 or Block 11 if

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