

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006557

FILED
Jun 08, 2004
Secretary of State**Entity Name:** ANNA MARIA ISLAND CHRISTIAN FOUNDATION CENTURION PRODUCTIONS, INC.**Current Principal Place of Business:**105 39TH STREET
HOLMES BEACH, FL 34217 US**New Principal Place of Business:**203 LAKEVIEW DRIVE
ANNA MARIA, FL 34216 US**Current Mailing Address:**P O BOX 1766
ANNA MARIA, FL 34216**New Mailing Address:****FEI Number:** 65-0824957 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**PACE, JOHN A
105 39TH STREET
HOLMES BEACH, FL 34217 US**Name and Address of New Registered Agent:**PACE, JOHN A
203 LAKEVIEW DRIVE
ANNA MARIA, FL 34216 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: _____

06/08/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** TD () Delete
Name: MCCULLOUGH, JAMES E
Address: 203 LAKEVIEW DR
City-St-Zip: ANNA MARIA, FL**Title:** PD () Delete
Name: PACE, JOHN A
Address: 203 LAKEVIEW DR
City-St-Zip: ANNA MARIA, FL**Title:** TVPD () Delete
Name: PACE, KIM L
Address: 203 LAKEVIEW DR
City-St-Zip: ANNA MARIA, FL**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: JOHN PACE

PD

06/08/2004

Electronic Signature of Signing Officer or Director

Date