

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003376

FILED
Jul 26, 2004
Secretary of State**Entity Name:** COMMISSIONED INTERNATIONAL CHURCH, INC.**Current Principal Place of Business:**608 W. OAKLAND AVE
OAKLAND, FL 34760**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 930
OAKLAND, FL 34760**New Mailing Address:****FEI Number:** 59-3451478**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FOWLER, JOSHUA
13949 FOX GLOVE STREET
WINTER GARDEN, FL 34787 US**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: DP () Delete
Name: FAWLER, JOSHUA P
Address: 13949 FOX GLINE ST.
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: FOWLER, DEBORAH A
Address: 13949 FOX GLOVE ST
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: OLMEDO, SAMUEL
Address: 14029 FOX GLOVE ST
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD () Delete
Name: OLMEDO, DANA
Address: 14029 FOX GLOVE ST
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FOWLER, JOSHUA P
Address: 13949 FOX GLINE ST.
City-St-Zip: WINTER GARDEN, FL 34787

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: JOSHUA FOWLER

DP

07/26/2004

Electronic Signature of Signing Officer or Director

Date