2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2004
Secretary of State

DOCUMENT# N98000001538

Entity Name: ACTUAL MISSION CHURCH OF CHRIST, INC.

Current Principal Place of Business:

5436 SPRING RUN AV.
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

P O BOX 618727
ORLANDO, FL 32861

New Mailing Address:

5436 SPRING RUN AV.
ORLANDO, FL 32819

FEI Number: 59-3504334 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LISA, MIZUHA
5436 SPRING RUN AVE
ORLANDO, FL 32819 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: P ( ) Delete
Name: LISA, MIZUHA
Address: 5436 SPRING RUN AVE.
City-St-Zip: ORLANDO, FL 32819

Title: TD ( ) Delete
Name: LISA, ROQUE
Address: 5436 SPRING RUN AVE.
City-St-Zip: ORLANDO, FL 32819

Title: VPD ( ) Delete
Name: LISA, DANIELA T
Address: 5436 SPRING RUN AVE.
City-St-Zip: ORLANDO, FL 32829

Title: S/D ( ) Delete
Name: LISA, CRISTIANE L
Address: 5436 SPRING RUN AVE
City-St-Zip: ORLANDO, FL 32819

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: MIZUHA LISA P 02/13/2004

Electronic Signature of Signing Officer or Director — Date