## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # N98000005230** 1. Entity Name FIRSTCOAST METROPOLITAN COMMUNITY CHURCH, 04-30-2004 90222 038 \*\*\*\*70.00 Principal Place of Business Mailing Address 2905 CR 214 PO BOX 3581 ST AUGUSTINE, FL 32085 US LOT H SAINT AUGUSTINE, FL 32086 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 04282004 Chq-NP CR2E037 (10/03) Applied For 4. FEI Number 59-3535676 City & State City & State Not Applicable Country \$8.75 Additional Zin Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JENSEN, REV. RUTH KAY Street Address (P.O. Box Number is Not Acceptable) 7709 EATON AVE. JACKSONVILLE, FL 32211 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) DATE Stonature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Due by May 1, 2004 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. D ☐ Delete TITLE Change Addition Addition TITLE WITCHER, EM NAME NAME STREET ADDRESS STREET ADDRESS 2979 BILOXI TRAIL MIDDLEBURG, FL 32068 CITY-ST-ZIP CITY-ST-ZIP D/5 S/D Delete TITLE Change **Addition** TITLE Rebecca Reyes 315 Gentian Road PATTERSON, TONIA NAME NAME STREET ADDRESS 4735 N.BANANA RIVER BLVD. STREET ADDRESS st. Augustine, FL 32086 CITY-ST-ZIP COCOA BEACH, FL 32931 CITY-ST-7P T/D ☐ Change Addition TITLE Delete TITLE Jerri Williams 337 E. River Road DENNEY, BILLY H NAME NAME STREET ADDRESS 74 MARINE STREET STREET ADORESS E. Palatka, FL 32131 ST. AUGUSTINE, FL 32085 --CITY-ST-ZP CITY-ST-ZP TITLE Delete TITI F ☐ Change 💹 Addition Gloria Perino DETORE, WILLIAM E NAME NAME 10336 Arrowhead Dr. 2108 DELLWOOD AVENUE STREET ADDRESS STREET ADDRESS Jacksonville FL 32257 CITY-ST-ZIP JACKSONVILLE, FL 32204 CITY-ST-ZIP Addition Change TITLE Delete TITLE Vicki Walden 5000 San Jose Blud. #212 GONZALEZ, KELEE NAME NAME STREET ADDRESS STREET ADDRESS 411 FIFTH STREET CITY-ST-ZIP ST. AUGUSTINE, FL 32084 CITY-ST-ZH Jacksonville, FL 32207 ☐ Delete TITLE ☐ Change ■ Addition TITLE JENSEN, RUTH K REV. NAME NAME

12. I hereby 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADORESS

CITY-ST-ZIP

7709 EATON AVENUE

JACKSONVILLE, FL 32211

SIGNATURE:

STREET ADDRESS

CHY-ST-ZP

Quoen ei OFFICER OR DIRECTOR

904-635-6923 April 28, 204

FILED