

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007235

FILED
Jul 06, 2004
Secretary of State**Entity Name:** ST. JOHN CHURCH OF GOD IN CHRIST MINISTRIES, INC.**Current Principal Place of Business:**735 THOMAS LANE
COCOA, FL 32922**New Principal Place of Business:****Current Mailing Address:**1135 GROVES DRIVE
ROCKLEDGE, FL 32955**New Mailing Address:**285 LAKE VIEW BLVD
COCOA, FL 32926**FEI Number:** 59-3627885**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HORSEY, PAUL
1135 GROVES DRIVE
ROCKLEDGE, FL 32955 US**Name and Address of New Registered Agent:**DUNN, ADAM
4615 NICOLE AVE
COCOA, FL 32927 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: ADAM DUNN

07/06/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HORSEY, PAUL
Address: 1135 GROVES DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: VC () Delete
Name: DUNN, ADAM
Address: 4615 NICOLE AVE
City-St-Zip: COCOA, FL 32927

Title: T () Delete
Name: WYNN, JOHN T
Address: 817 HOWARD STREET
City-St-Zip: ROCKLEDGE, FL 32927

Title: AT () Delete
Name: GLENN, AMOS
Address: 2527 STRATFORD DR
City-St-Zip: COCOA, FL 32923

Title: D () Delete
Name: JONES, CAROLYN
Address: 1115 SANTA ROSA DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: HORSEY, MAMIE D
Address: 1135 GROVES DR
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VC (X) Change () Addition
Name: DUNN, ADAM
Address: 4615 NICOLE AVE
City-St-Zip: COCOA, FL 32927

Title: T (X) Change () Addition
Name: WYNN, JOHN
Address: 817 HOWARD ST.
City-St-Zip: ROCKLEDGE, FL 32955

Title: AT (X) Change () Addition
Name: GLENN, AMOS
Address: 2527 STRATFORD DR.
City-St-Zip: COCOA, FL 32926

Title: D (X) Change () Addition
Name: THOMAS, LEON
Address: 3355 AMBERLY ST.
City-St-Zip: COCOA, FL 32926

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WYNN, SIPPO
Address: 833 LEVITT PARKWAY
City-St-Zip: ROCKLEDGE, FL 32955

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 WYNN

T

07/06/2004

Electronic Signature of Signing Officer or Director

Date