

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002868

FILED
Jan 17, 2004
Secretary of State

Entity Name: ST. JOHN CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

701 VERDELL STREET
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

419 SCHOOL STREET
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 05-0019706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARLAN, OTHA
11953 HATCHER CIRCLE
ORLANDO, FL 32824 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: HARLAN, OTHA
Address: 11953 HATCHER CIRCLE
City-St-Zip: ORLANDO, FL 32824

Title: TT () Delete
Name: RUSS, IWILLA
Address: 936 MARIAN ST.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: ST () Delete
Name: BROXTON, DAISY
Address: 322 LOCKHART
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T () Delete
Name: STEPHENS, DAVID
Address: 1129 MADISON AV.
City-St-Zip: DAYTONA BEACH, FL 32114

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: DOROTHY ANDERSON

P

01/17/2004

Electronic Signature of Signing Officer or Director

Date