2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/9/

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-09-2004 90024 033 ****61.25

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1. Entity Name
RIVER CREST CHURCH, INC.

66417534

Principal Place of Business	Mailing Address
1301 BEVILLE RD SUITE #15 DAYTONA BEACH, FL 32119 US	1301 BEVILLE RD SUITE #15 DAYTONA BEACH, FL 32119 US

01112004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-3544844
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SNYDER, ALDEN L
5886 WOODPOINT TER
~~DAYTONA BEACH~~, FL 32128
PORT ORANGE

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PELLETIER, JAMES J
STREET ADDRESS	1170 S PALMETTO AVE
CITY-ST-ZIP	DAYTONA BEACH, FL 32114
TITLE	D
NAME	PELLETIER, REBECCA L
STREET ADDRESS	1170 S PALMETTO AVE
CITY-ST-ZIP	DAYTONA BEACH, FL 32114
TITLE	~~D~~
NAME	~~THEREAULT, BRIAN C~~
STREET ADDRESS	~~285 N OAKLAND AVE #12~~
CITY-ST-ZIP	~~PASADENA, CA~~
TITLE	T
NAME	ALDEN LYNN SNYDER
STREET ADDRESS	5886 WOODPOINT TER
CITY-ST-ZIP	PORT ORANGE, FL 32128
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: JAMES J. PELLETIER 4/25/04 (386)322-0848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #