

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P26731

1. Entity Name

**ARTHUR BLESSITT EVANGELISTIC ASSOCIATION
OUTREACH FOR CHRIST, INCORPORATED**



Principal Place of Business

**3444 MARINATOWN LN.
SUITE 18
N. FT. MYERS FL 33903
US**

Mailing Address

**PO BOX 4737
N. FT. MYERS FL 33918
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

95-6205400

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLESSITT, ARTHUR O.
3444 MARINATOWN LANE SUITE 18
NORTH FT. MYERS FL 33903**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **BLESSITT, ARTHUR O.**
STREET ADDRESS **3444 MARINATOWN LN., STE 18**
CITY - ST - ZIP **NORTH FT MYERS FL 33903**

☐ Change ☐ Addition
**U000000035421
02/06/04-80016-019 61.25**

TITLE **SD** ☐ Delete
NAME **BLESSITT, DENISE**
STREET ADDRESS **3444 MARINATOWN LN, STE 18**
CITY - ST - ZIP **NORTH FT MYERS FL 33903**

☐ Change ☐ Addition

TITLE **VD** ☐ Delete
NAME **TURNER, GWIN**
STREET ADDRESS **5918 SHENANDOAH**
CITY - ST - ZIP **LOS ANGELES CA 33903**

☐ Change ☐ Addition

TITLE **TD** ☐ Delete
NAME **TURNER, NORMA**
STREET ADDRESS **5918 SHENANDOAH**
CITY - ST - ZIP **LOS ANGELES CA 90056**

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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:

Arthur O. Blessitt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARTHUR O. BLESSITT, 2/3/04

Date

Daytime Phone #

239 997-5800