

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 06, 2004  
Secretary of State**

DOCUMENT# 709909

Entity Name: EAGLE LAKE CHURCH OF CHRIST, INC.

**Current Principal Place of Business:**

261 CORNER OF 3RD & BAY AVE  
BOX 582  
EAGLE LAKE, FL 33839

**New Principal Place of Business:**

**Current Mailing Address:**

261 CORNER OF 3RD & BAY AVE  
BOX 582  
EAGLE LAKE, FL 33839

**New Mailing Address:**

FEI Number: 59-2878260      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

THORNHILL, CHARLES A  
4250 NEWLYN LANE  
WINTER HAVEN, FL 33880      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: PD      ( ) Delete  
Name: THORNHILL, CHARLES A  
Address: 4250 NEWLYN LANE  
City-St-Zip: WINTER HAVEN, FL 338804956

Title: VP      ( ) Delete  
Name: THORNHILL, C L  
Address: 3935 THORNHILL RD.  
City-St-Zip: WINTER HAVEN, FL 338805037

Title: OD      ( ) Delete  
Name: THORNHILL, WILLIAM R  
Address: 905 AVE. T S.E.  
City-St-Zip: WINTER HAVEN, FL 338804620

Title: TD      ( ) Delete  
Name: HUBBARD, CALVIN  
Address: 4821 MARKWAY  
City-St-Zip: BARTOW, FL 338309262

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: TD      (X) Change ( ) Addition  
Name: HUBBARD, CALVIN  
Address: 265 3RD ST N  
City-St-Zip: EAGLE LAKE, FL 33839

Title: OD      ( ) Change (X) Addition  
Name: EVANS, BERLE  
Address: 5141 TRANSPORT ROAD  
City-St-Zip: BARTOW, FL 33830

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: BERLE EVANS

OD

01/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date