2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2004
Secretary of State

DOCUMENT# N02000003681

Entity Name: CITY ON A HILL, INC.

Current Principal Place of Business:

2811 DEERFIELD ST.
N. FT. MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

2811 DEERFIELD ST.
N. FT. MYERS, FL 33917

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEEBLES, BONNIE L
902 S.E. 23RD TERRACE
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

PEEBLES, BONNIE L
2811 DEERFIELD STREET
N FT. MYERS, FL 33917 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: BONNIE PEEBLES 07/15/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PEEBLES, JOHN C
Address: 902 S.E. 23RD TERRACE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: D ( ) Delete
Name: PEEBLES, BONNIE L D
Address: 902 S.E. 23RD TERRACE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: D ( ) Delete
Name: PORTMAN, PAUL D
Address: 17110 CORAL CAY LANE
City-St-Zip: FORT MYERS, FL 33908 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PEEBLES, JOHN C
Address: 2811 DEERFIELD STREET
City-St-Zip: N. FT. MYERS, FL 33917 US

Title: D (X) Change ( ) Addition
Name: PEEBLES, BONNIE L D
Address: 2811 DEERFIELD STREET
City-St-Zip: N. FT. MYERS, FL 33917 US

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: JOHN C. PEEBLES D 07/15/2004
Electronic Signature of Signing Officer or Director Date