


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 15, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 702009**  
 1. Entity Name  
**NEW HORIZONS CHRISTIAN CHURCH, INC.**



Principal Place of Business      Mailing Address  
 525 W. PLANT ST. SUITE B      525 W. PLANT ST. SUITE B  
 WINTER GARDEN, FL 34787      WINTER GARDEN, FL 34787

**DO NOT WRITE IN THIS SPACE**



01042007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-1268496</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  
 WHITE, EUEL  
 1518 CHARLOTTE LANE  
 ORLANDO, FL 32804

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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 re-registering)

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

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

U00000638085  
 02/27/07-80015-016 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WHITE, LAVERNE 839 HAMMOCKS DRIVE OCOE, FL 34761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITE, EUEL 1518 CHARLOTTE LANE ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WALTER, PHILIP 1209 CASTLEPORT RD WINTER GARDEN, FL 34787
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SCHMIDT, RAY 3816 SCARBOROUGH CRT CLERMONT, FL 34711
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 exemptions contained in Chapter 119, 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:** Euel E. White Euel E. White      2-5-07      407-760-4135  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #