

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # 704581
 1. Entity Name
 HAVENDALE CHRISTIAN CHURCH, INC.



Principal Place of Business
 3900 LAKE BLUE DR N W
 WINTER HAVEN, FL 33881-1093

Mailing Address
 3900 LAKE BLUE DR N W
 WINTER HAVEN, FL 33881-1093



01052004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
 59-6143147

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

ANDERSON, ROGER C
 124 WALDEMAR CT., S.E.
 WINTER HAVEN, FL 33884

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

Filing Fee is \$61.25
Due by May 1, 2004

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

U00000115673
 04/16/04-80033-020 61.25

10. OFFICERS AND DIRECTORS

| | |
|----------------|------------------------|
| TITLE | C |
| NAME | ANDERSON, ROGER C |
| STREET ADDRESS | 124 WALDEMAR CT., S.E. |
| CITY-ST-ZIP | WINTER HAVEN, FL 33884 |
| TITLE | D |
| NAME | ERDMAN, DON |
| STREET ADDRESS | 528 TANGLEWOOD DRIVE |
| CITY-ST-ZIP | AUBURNDALE, FL 33823 |
| TITLE | D |
| NAME | BURKET, MAX |
| STREET ADDRESS | LAKE SIDE RANCH #7 |
| CITY-ST-ZIP | WINTER HAVEN, FL 33881 |
| TITLE | PD |
| NAME | JACKSON, GENE |
| STREET ADDRESS | 115 PARADISE LANE |
| CITY-ST-ZIP | AUBURNDALE, FL |
| 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: Roger C. Anderson 4/13/04 (863)967-0046
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Roger C. Anderson