


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 20, 2005 8:00 am**  
**Secretary of State**

07-20-2005 90025 023 \*\*\*\*61.25

**DOCUMENT # 732989**  
 1. Entity Name  
 HOLY CROSS CHURCH OF WINTER HAVEN, INC.



Principal Place of Business  
 201 KIPLING LANE  
 WINTER HAVEN, FL 33884

Mailing Address  
 201 KIPLING LANE  
 WINTER HAVEN, FL 33884

**50056278**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

07062005 Chg-NP CR2E037 (10/03)

City & State  
 Zip Country

4. FEI Number  
 59-1611416

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
~~ALLEN, CHARLES~~  
~~41 BERNA CIRCLE~~  
~~WINTER HAVEN, FL 33884~~

7. Name and Address of New Registered Agent  
 Name  
 Doan, Andrew S.  
 Street Address (P.O. Box Number is Not Acceptable)  
 201 Kipling Lane  
 City  
 Winter Haven FL Zip Code 33884

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 *Charles Allen* DATE 7-10-05

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

**Filing Fee is \$61.25**  
**Due by September 7, 2005**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DT
	SIMMONDS, LARRY L	11 LAKE LINK DRIVE	WINTER HAVEN, FL 33884	<input type="checkbox"/> Delete
	DOAN, ANDREW S	201 KIPLING LANE	WINTER HAVEN, FL	<input type="checkbox"/> Delete
	ALLEN, CHARLES	41 BERNA CIRCLE	WINTER HAVEN, FL 33884	<input checked="" type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	Ellis, Charles	1134 Highland Park Dr S.	Lake Wales FL 33859	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> 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: *Andrew S. Doan* 863-324-4021

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Andrew S. Doan