

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

**FILED  
Aug 01, 2005  
Secretary of State**

DOCUMENT# N17966

Entity Name: HEARTLAND WORSHIP CENTER, INC.

**Current Principal Place of Business:**

2874 E IRLO BRONSON  
KISSIMMEE, FL 34744 US

**New Principal Place of Business:**

**Current Mailing Address:**

2874 E IRLO BRONSON  
KISSIMMEE, FL 34744 US

**New Mailing Address:**

FEI Number: 59-2720045      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SMITH, GARY  
2874 E. IRLO BRONSON HIGHWAY  
KISSIMMEE, FL 32742 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: SMITH, GARY,  
Address: 2001 GRANADA BLVD  
City-St-Zip: KISSIMMEE, FL

Title: SD ( ) Delete  
Name: SMITH, JANIS,  
Address: 2001 GRANADA BLVD  
City-St-Zip: KISSIMMEE, FL

Title: D ( ) Delete  
Name: SMITH, JEFFERY  
Address: 2204 JESSICA LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete  
Name: KILLER, JOHN  
Address: 2616 FLORENCE DR.  
City-St-Zip: KISSIMMEE, FL 34744

**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: D (X) Change ( ) Addition  
Name: WILKER, JOHN  
Address: 2616 FLORENCE DR.  
City-St-Zip: KISSIMMEE, FL 34744

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: GARY SMITH

PD

08/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date