

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16091

FILED  
Mar 03, 2006  
Secretary of State

**Entity Name:** FIRST ASSEMBLY OF GOD OF KEYSTONE HEIGHTS, FLORIDA, INC.

**Current Principal Place of Business:**

8025 S.R. 100  
HIGHWAY 100  
KEYSTONE HEIGHTS, FL 32656 US

**New Principal Place of Business:**

**Current Mailing Address:**

8025 S.R. 100  
HIGHWAY 100  
KEYSTONE HEIGHTS, FL 32656 US

**New Mailing Address:**

**FEI Number:** 59-3183534      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

OSTEEN, DONALD R  
245 COUNTRY LIVING CIRCLE  
MELROSE, FL 32666 US

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

MAYER, DAVID R  
190 SW PEACH ST.  
KEYSTONE HEIGHTS, FL 32656 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: DAVID R. MAYER

03/03/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: FIDLER, KRIS  
Address: 7029 CRYSTAL LAKE RD  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: SD ( ) Delete  
Name: FERNANDEZ, JASON  
Address: 5499 JEFFERSON ST  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D ( ) Delete  
Name: CARTER, TOLLIE  
Address: 7686 OAK DR  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D ( ) Delete  
Name: WEAVER, TROY  
Address: 127 OAK DRIVE  
City-St-Zip: INTERLACHEN, FL 32148

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD ( ) Change (X) Addition  
Name: OSTEEN, DONALD R  
Address: 245 COUNTRY LIVING CIR.  
City-St-Zip: MELROSE, FL 32666

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DAVID R. MAYER

REV

03/03/2006

Electronic Signature of Signing Officer or Director

Date