


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90244 001 ****61.25
05-02-2006 90244 002 *****8.75

DOCUMENT # 708794	
1. Entity Name CARVER HEIGHTS CHURCH OF CHRIST, INC.	

Principal Place of Business 901 BEECHER ST LEESBURG FL 32748	Mailing Address 901 BEECHER ST LEESBURG FL 32748
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/05)

4. FEI Number NO-T APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DELOACH, RICHARD L 2224 EVIE STREET LAKE WALES FL 33853	
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 Richard L. DeLoach DATE 4-23-06
(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	CTT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KERRISON, HENRY	NAME	
STREET ADDRESS	807 BECKER ST	STREET ADDRESS	
CITY-ST-ZIP	LEESBURG FL 34748	CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARRISON, WILLIAM	NAME	DeLoach, Richard L.
STREET ADDRESS	2116 WOODLAND BLVD	STREET ADDRESS	2224 Evie Street
CITY-ST-ZIP	LEESBURG FL	CITY-ST-ZIP	Lake Wales, FL 33898
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELOACH, DIANE B	NAME	
STREET ADDRESS	2224 EVIL ST	STREET ADDRESS	
CITY-ST-ZIP	LAKE WALES FL 33853	CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LAWRENCE, HENRY	NAME	Westley, Willie C.
STREET ADDRESS	812 MERRIDALE	STREET ADDRESS	2834 Lady Lake Blvd.
CITY-ST-ZIP	LEESBURG FL 34748	CITY-ST-ZIP	Lake Wales, FL 32159
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANUEL, FRANK	NAME	
STREET ADDRESS	204 VILLA AVENUE	STREET ADDRESS	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELL, LAWRENCE	NAME	
STREET ADDRESS	259 PINE AVENUE	STREET ADDRESS	
CITY-ST-ZIP	MOUNT DORA FL 32757	CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Richard L. DeLoach Trustee Richard L. DeLoach 4-23-06 (863)605-0265