

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90011 008 ****70.00

DOCUMENT # 717510

1. Entity Name
HEAVENLY HEIGHTS BAPTIST CHURCH, INC.



Principal Place of Business
**6680 DUNN AVENUE
JACKSONVILLE, FL 32218**

Mailing Address
**6680 DUNN AVENUE
JACKSONVILLE, FL 32218**

DO NOT WRITE IN THIS SPACE



04112007 No Chg-NP

CR2E037 (4/06)

4. FEI Number
59-1378573

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BECK, SIDNEY
5272 RATLIFF RD
CALLAHAN, FL 32011**

**DO NOT WRITE
IN THIS SPACE**

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, 2007**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	MARK L. CHESSER
STREET ADDRESS	7709 SYCAMORE ST
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	VD
NAME	MURPHY, WILLIAM, H
STREET ADDRESS	RT 3 BOX 147 45281 RATLIFF RD.
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	VD
NAME	PATTERSON, DANIEL WAYNE
STREET ADDRESS	3473 GREENBRIER DR
CITY-ST-ZIP	JACKSONVILLE, FL 32254
TITLE	PD
NAME	BECK, S.E.
STREET ADDRESS	43294 RATLIFF RD RATLIFF RD.
CITY-ST-ZIP	CALLAHAN, FL 32011
TITLE	TD
NAME	CONRAD, TED
STREET ADDRESS	1161 SAWYERWOOD DR
CITY-ST-ZIP	JACKSONVILLE, FL 32221
TITLE	VD
NAME	PATTERSON, JAMES D
STREET ADDRESS	3381 SUNNYBROOK AVE. S.
CITY-ST-ZIP	JACKSONVILLE, FL 32254

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Sidney E. Beck* **SIDNEY E. BECK**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-07

Date

904-764-5667

Daytime Phone #