

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723250

FILED  
Jan 09, 2007  
Secretary of State

**Entity Name:** FENTON MOORHEAD EVANGELISTIC ASSOCIATION, INC.

**Current Principal Place of Business:**

%TED MOORHEAD  
2571 VERNON DRIVE  
PALM BAY, FL 32905 US

**New Principal Place of Business:**

**Current Mailing Address:**

% TED MOORHEAD  
2571 VERNON DRIVE  
PALM BAY, FL 32905 US

**New Mailing Address:**

**FEI Number:** 23-7219520

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORHEAD, TED  
2571 VERNON DRIVE  
PALM BAY, FL 32905 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: D ( ) Delete  
Name: MOORHEAD II, JAMES,  
Address: 5057 SOUTH 171ST AVE  
City-St-Zip: OMAHA, NE 68135 US

Title: P ( ) Delete  
Name: MOORHEAD, FENTON,  
Address: 825 BRIELLE COURT  
City-St-Zip: SIMPSONVILLE, SC 29681 US

Title: S ( ) Delete  
Name: MOORHEAD, MARY R.,  
Address: 825 BRIELLE COURT  
City-St-Zip: SIMPSONVILLE, SC 29681 US

Title: D ( ) Delete  
Name: HOLDEN, J.T.,  
Address: 495 TREXLER LOOP ROAD  
City-St-Zip: SALISBURY, NC

Title: D ( ) Delete  
Name: HARDY, AMY A.,  
Address: 17 BRAELOCK CT  
City-St-Zip: GREENVILLE, SC 29615

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

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: FENTON MOORHEAD

P

01/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date