## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Jul 25, 2007 8:00 am Secretary of State **DOCUMENT # 732226** 1. Entity Name 07-25-2007 90044 017 \*\*\*\*61.25 FIRST BAPTIST CHURCH OF HARBOR OAKS, INC. Principal Place of Business Mailing Address 5730 S. RIDGEWOOD AVENUE 5730 S. RIDGEWOOD AVENUE HARBOR OAKS FL 32127 HARBOR OAKS FL 32127 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #. etc. 2nd MOORE CR2E037 (4/07) City & State City & State 4. FEI Number Applied For 59-1584390 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEONHARDT, MARGARET 5726 RIVERSIDE DR. Street Address (P.O. Box Number is Not Acceptable) PORT ORANGE FL 32127 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 ly 20,2007 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By September 5, 2007 Trust Fund Contribution. Added to Fees Florida Department of State: OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Delete Addition Wright, Row MCADORY, NAME NAME STREET ADDRESS 2308 CITRUS AVE. STREET ADDRESS DAYTONA BEACH FL 32119 CITY-ST-ZIP TS ☐ Delete 11114 Change ☐ Addition PETROS, DAVE NAME STREET ADDRESS 5613 ISABELLE AVE. STREET ADDRESS PORT ORANGE FL 32127 CHY-ST-7IP CHY ST ZIP TITLE ☐ Delete TITLE Change Addition HALLOWAY, MARGE NAME NAME 5959 RIVERSIDE DR STREET ADDRESS STREET ADDRESS HARBOR OAKS FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition HODSON, HENRY NAME STREET ADDRESS 316 GEORGETOWN RD. STREET ADDRESS DAYTONA BEACH FL 32119 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete THILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

FILED

Margaret Leonhardt SIGNATURE: MARGARET LEONHARDT 7-20-07 386-767-6062

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