2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#737780

FILED Apr 20, 2006 Secretary of State

Entity Name: FOREST HEIGHTS BAPTIST CHURCH OF FORT WALTON BEACH, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 804 TANAGER DRIVE FORT WALTON BEACH, FL 32547 **Current Mailing Address: New Mailing Address:** 804 TANAGER DRIVE FORT WALTON BEACH, FL 32547 FEI Number: 59-1873390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARRIS, ROBBY L 301 ANGELA LANE MARY ESTHER, FL 32569 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete FORTENBERRY, HARRY, TUMLIN, JIMMY W Name: Name: 617 SPENCER DR. Address: 204 KETTERING CT Address: City-St-Zip: FT WALTON BCH, FL 32547 City-St-Zip: FT WALTON BCH, FL 32547 Title: VD Title: (X) Change () Addition () Delete TAYLOR, RAY Name: PHILLIPS, STEVE Name: Address: 730 HART RD Address: 905-1 PEIDMONT PL City-St-Zip: FT WALTON BEACH, FL 32547 City-St-Zip: FT WALTON BEACH, FL 32547 Title: () Delete Title: (X) Change () Addition DICKERSON, JOHN COLE, MILDRED Name: Name: 114 NORTH AUDREY CIRCLE Address: 823 TANAGER RD. Address: City-St-Zip: FT WALTON BEACH, FL 32547 City-St-Zip: FT WALTON BEACH, FL 32548 Title: () Delete Title: () Change (X) Addition FORTENBERRY, HARRY Name: Name: 617 SPENCER DR. Address: Address: City-St-Zip: City-St-Zip: FT WALTON BCH, FL 32547 Title: () Delete Title: () Change (X) Addition JOHNSON, DAVID Name: Name: 652 MCDONALD ST Address: Address: City-St-Zip: City-St-Zip: CRESTVIEW, FL 32536

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: ROBBY L HARRIS RA 04/20/2006