

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744604

FILED
Jan 05, 2008
Secretary of State

Entity Name: HERITAGE BAPTIST CHURCH, INCORPORATED OF ORANGE PARK

Current Principal Place of Business:

4325 HIGHWAY 17 SOUTH
ORANGE PARK, FL 32003

New Principal Place of Business:

Current Mailing Address:

4325 HIGHWAY 17 SOUTH
ORANGE PARK, FL 32003

New Mailing Address:

FEI Number: 59-1887904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAGER, MELISSE S
411 LUCY'S LANE
ORANGE PARK, FL 32003 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: PD () Delete
Name: KAGER, MELISSE S.,
Address: 411 LUCY'S LANE
City-St-Zip: ORANGE PARK, FL 32003

Title: VD () Delete
Name: KAGER, MELODY L
Address: 393 LUCY'S LANE
City-St-Zip: ORANGE PARK, FL 32003

Title: STD () Delete
Name: WHITE, LISA A
Address: 168 UNION ROAD
City-St-Zip: SOMMERVILLE, AL 35670

Title: D () Delete
Name: WHITE, PATRICIA L
Address: 168 UNION RD
City-St-Zip: SOMERVILLE, AL 35670

Title: C () Delete
Name: HILLYARD, LINDA
Address: 2241 ORANGE AVE.
City-St-Zip: ORANGE PARK, FL 32073

Title: M () Delete
Name: BABBETT, CAROLYN
Address: 12747 HAPPY HILL ROAD
City-St-Zip: DADE CITY, FL 33525

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: C (X) Change () Addition
Name: CAMPBELL, JEFF
Address: BOX 594
City-St-Zip: FLORAHOME, FL 32140

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

I hereby certify that the information supplied with this filing does not qualify 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: MELISSE S. KAGER

PD

01/05/2008

Electronic Signature of Signing Officer or Director

Date