2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#749640

FILED Jul 06, 2007 Secretary of State

Entity Name: FAIR HAVEN BAPTIST CHURCH OF ZEPHYRHILLS, INC.

Current Principal Place of Business: New Principal Place of Business:

5353 5TH ST. 4781 ALLEN ROAD

ZEPHRYHILLS, FL 33542 ZEPHYRHILLS, FL 33541

Current Mailing Address: New Mailing Address:

5353 5TH ST. P O BOX 1939

ZEPHRYHILLS, FL 33542 ZEPHYRHILLS, FL 33539

FEI Number: 59-2005971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SMITH, MICHAEL J SMITH, MICHAEL J

39013 BLUE JAY AVE. 5929 BUTTON FLOWER COURT ZEPHYRHILLS, FL 33542 US ZEPHYRHILLS, FL 33541 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: MICHAEL J. SMITH 07/06/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: SMITH, MICHAEL J Name: SMITH, MICHAEL J

Address: 39013 BLUE JAY AVE Address: 5029 BUTTON FLOWER COURT

City-St-Zip: ZEPHYRHILLS, FL 33542 City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S () Delete Title: () Change () Addition Name: MASON, LINDA Name:

 Address:
 36427 KEYSTONE AVE.
 Address:

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 THURSTON, TIMOTHY
 Name:
 THURSTON, TIMOTHY

 Address:
 4940 9TH ST
 Address:
 38535 CENTRAL AVE

 City-St-Zip:
 ZEPHYRHILLS, FL 33542
 City-St-Zip:
 ZEPHYRHILLS, FL 33540

Name: WHITE, WAYNE Name: WHITE, WAYNE

 Address:
 5730 8TH ST
 Address:
 6733 BLUFF MEADOW CT

 City-St-Zip:
 ZEPHYRHILLS, FL 33542
 City-St-Zip:
 ZEPHYRHILLS, FL 33544

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: LINDA MASON SECT 07/06/2007