## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 749640**

FILED Apr 29, 2008 Secretary of State

Entity Name: FAIR HAVEN BAPTIST CHURCH OF ZEPHYRHILLS, INC. **Current Principal Place of Business: New Principal Place of Business:** 4781 ALLEN ROAD 34927 EILAND BLVD ZEPHYRHILLS, FL 33541 ZEPHYRHILLS, FL 33541 **Current Mailing Address: New Mailing Address:** P O BOX 1939 ZEPHYRHILLS, FL 33539 FEI Number: 90-0333625 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, MICHAEL J 5929 BUTTON FLOWER COURT ZEPHYRHILLS, FL 33541 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: () Delete (X) Change ( ) Addition SMITH, MICHAEL J SMITH, MICHAEL J Name: Name: Address: 5029 BUTTON FLOWER COURT Address: 5929 BUTTON FLOWER COURT City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: ZEPHYRHILLS, FL 33541 Title: () Delete Title: () Change () Addition Name: MASON, LINDA Name: Address: 36427 KEYSTONE AVE. Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition THURSTON, TIMOTHY Name: THURSTON, TIMOTHY Name: 38535 CENTRAL AVE 2709 SPARKMAN RD Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33540 City-St-Zip: PLANT CITY, FL 33566 Title: () Delete Title: () Change () Addition Name: WHITE, WAYNE Name: 6733 BLUFF MEADOW CT Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33544 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: LINDA MASON SECR 04/29/2008