


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 07, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 753008</b> 1. Entity Name <b>CHRISTIAN HERITAGE CHURCH OF LAKE CITY, FLORIDA, INC.</b>	
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Principal Place of Business <b>159 SW HUDSON LANE LAKE CITY, FL 32025</b>	Mailing Address <b>159 SW HUDSON LANE LAKE CITY, FL 32025</b>
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07052006 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-2108304</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>TAYLOR, EDESEL C 159 SW HUDSON LANE LAKE CITY, FL 32025</b>
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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 the obligations of registered agent.
SIGNATURE <u><i>Edecel Taylor</i></u> <b>7-05-06</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>

<b>Filing Fee is \$81.25 Due by September 8, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAYLOR, EDESEL C 402 SW PONCE DE LEON AVE LAKE CITY, FL 32025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KURTZ, TONY 410 SE PEACOCK TERRACE LAKE CITY, FL 32025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHEFFIELD, DAVID 11523 SUMMER BIRD CT JACKSONVILLE, FL 32221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 changed, or on an attachment with an address, with all other like empowered.
<b>SIGNATURE:</b> <u><i>Edecel Taylor</i></u> <b>7-05-06</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>