

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90104 047 ****61.25

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DOCUMENT # 764307

1. Corporation Name

HIGHWAYS AND HEDGES-GO TELL INTERDENOMINATIONAL
CHURCH, INCORPORATED

Principal Place of Business
1533 S.E. 3RD AVENUE
GAINESVILLE FL 32601
US

Mailing Address
1603 SE THIRD AVE
GAINESVILLE FL 32601
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

07/26/1982

4. FEI Number

59-2225510

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

DAVIS, MAE O.A.
619 NORTHEAST 18TH STREET
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME DAVIS, MAE OSTEEN (AU)
STREET ADDRESS 1603 SE 3RD AVE
CITY-ST-ZIP GAINESVILLE FL

TITLE VD ☐ DELETE

NAME JOHNSON, LYNDA BROWN
STREET ADDRESS 1439 SOUTHEAST 1ST TERR
CITY-ST-ZIP GAINESVILLE FL

TITLE D ☐ DELETE

NAME REDDICK, FLOSSIE M
STREET ADDRESS 3540 SW ARCHER RD, LOT 308
CITY-ST-ZIP GAINESVILLE FL 32608

TITLE TD ☐ DELETE

NAME NEVA SMITH
STREET ADDRESS 1534 NE 3RD AVE
CITY-ST-ZIP GAINESVILLE FL

TITLE D ☐ DELETE

NAME DEBOSE, JERRY
STREET ADDRESS P. O. BOX 343 N/A
CITY-ST-ZIP LA CROSSE FL 32658

TITLE D ☐ DELETE

NAME PAT A. WIGGINS
STREET ADDRESS P.O. BOX 293 - 14311 SW 175TH TERRACE
CITY-ST-ZIP ARCHER FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mae O. Davis - 03/01/99 - (352) 376-4339

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)