2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2005
Secretary of State

DOCUMENT# 764307

Entity Name: HIGHWAYS AND HEDGES--GO TELL INTERDENOMINATIONALCHURCH, INCORPORATED

Current Principal Place of Business:

1533 S.E. 3RD AVENUE
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

1603 SE THIRD AVE
GAINESVILLE, FL 32601 US

New Mailing Address:

FEI Number: 59-2225510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, MAE O.A.
1603 SE 3RD AVE
GAINESVILLE, FL 32641 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:	DAVIS, MAE OSTEEN (AU	
Address:	1603 SE 3RD AVE	
City-St-Zip:	GAINESVILLE, FL	
Title:	VD	( ) Delete
Name:	JOHNSON, LYNDA BROWN,	
Address:	107 NE 15 STREET	
City-St-Zip:	GAINESVILLE, FL 32601	
Title:	D	( ) Delete
Name:	REDDICK, FLOSSIE M	
Address:	3540 SW ARCHER RD, LOT 308	
City-St-Zip:	GAINESVILLE, FL 32608	
Title:	TD	( ) Delete
Name:	NEVA SMITH,	
Address:	1534 NE 3RD AVE	
City-St-Zip:	GAINESVILLE, FL	
Title:	D	( ) Delete
Name:	DEBOSE, JERRY	
Address:	P. O. BOX 343 N/A	
City-St-Zip:	LA CROSSE, FL 32658	
Title:	D	( ) Delete
Name:	JOHNSON, CLARETHA	
Address:	904 SW 62 TERR APT B	
City-St-Zip:	GAINESVILLE, FL 32607	

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MAE O. A, DAVIS PD 01/11/2005
Electronic Signature of Signing Officer or Director Date