## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#764307** 

FILED Mar 31, 2006 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 1533 S.E. 3RD AVENUE GAINESVILLE, FL 32601 US **Current Mailing Address: New Mailing Address:** 1603 SE THIRD AVE GAINESVILLE, FL 32601 US FEI Number: 59-2225510 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVIS, MAE O.A. 1603 SE 3RD AVE GAINESVILLE, FL 32641 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DAVIS, MAE OSTEEN (AU Name: Name: 1603 SE 3RD AVE Address: Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: Title: VD () Delete Title: () Change () Addition JOHNSON, LYNDA BROWN, Name: Name: Address: **107 NE 15 STREET** Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: () Delete Title: () Change () Addition REDDICK, FLOSSIE M Name: Name: 3540 SW ARCHER RD, LOT 308 Address: Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: ( ) Delete Title: TD Title: () Change () Addition Name: NEVA SMITH, Name: Address: 1534 NE 3RD AVE Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: Title: () Delete Title: () Change () Addition DEBOSE, JERRY Name: Name: P. O. BOX 343 N/A Address: Address: City-St-Zip: LA CROSSE, FL 32658 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition JOHNSON, CLARETHA GOLDEN, LORETTA L Name: Name: Address: 904 SW 62 TERR APT B Address: 5520 N.W. 32 ND ST. GAINESVILLE, FL 32607 GAINESVILLE, FL 32653 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GOLDEN, LORETTA, L. D 03/31/2006