

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003878

FILED
Mar 09, 2005
Secretary of State

Entity Name: HEARTLAND COMMUNITY CHURCH OF LAKE CITY, INC.

Current Principal Place of Business:

898 SW DEPUTY J DAVIS LANE
LAKE CITY, FL 32024

New Principal Place of Business:

5979 SW STATE ROAD 247
LAKE CITY, FL 32024

Current Mailing Address:

898 SW DEPUTY J DAVIS LANE
LAKE CITY, FL 32024

New Mailing Address:

5979 SW STATE ROAD 247
LAKE CITY, FL 32024

FEI Number: 59-3657436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSIDY, TIMOTHY P SR.
ROUTE 5, BOX 50317
LAKE CITY, FL 32024 US

Name and Address of New Registered Agent:

CASSIDY, TIMOTHY P SR.
5979 SW STATE ROAD 247
LAKE CITY, FL 32024 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:

03/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASSIDY, TIMOTHY P SR.
Address: ROUTE 5, BOX 50317
City-St-Zip: LAKE CITY, FL 32024

Title: SD () Delete
Name: CASSIDY, SHERRI W
Address: ROUTE 5, BOX 50317
City-St-Zip: LAKE CITY, FL 32024

Title: TD () Delete
Name: BROWN, CHARLES B III
Address: ROUTE 17, BOX 871
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: CASSIDY, SHERRI W
Address: 5979 SW STATE ROAD 247
City-St-Zip: LAKE CITY, FL 32024

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: TIMOTHY P. CASSIDY SR.

RA

03/09/2005

Electronic Signature of Signing Officer or Director

Date