

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2007 08:00 AM
Secretary of State

DOCUMENT # N00000006693

1. Entity Name
HEARTLAND CHRISTIAN CHURCH, INC.



Principal Place of Business
**2705 ALT S. 27
SEBRING, FL 33870**

Mailing Address
**4019 SANTA BARBARA DRIVE
SEBRING, FL 33875**



01072007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1045888

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MOORE, FLORENCE
4709 SANTA BARBARA DRIVE
SEBRING, FL 33875**

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IN THIS SPACE**

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 *Ted Moore - PRESIDENT*

1-07-07
DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**U00000581496
01/10/07-80089-021 61.25**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MOORE, TED 4019 SANTA BARBARA DR SEBRING, FL 33875
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SWENSON, J. RICHARD 229 HOWEY RD. SEBRING, FL 33872
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MOORE, FLORENCE A 4709 SANTA BARBARA DRIVE SEBRING, FL 33875
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAYMAKER, WANDA 309 S. EGRET ST. SEBRING, FL 33872
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WATSON, TERRI 3720 LAKEWOOD RD SEBRING, FL 338754628
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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.

SIGNATURE: *Ted Moore - PRESIDENT* 1-07-07 (863) 314-9693

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #