

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009175

FILED
Jan 10, 2007
Secretary of State

Entity Name: FOUNTAIN HEAD BAPTIST CHURCH, INC.

Current Principal Place of Business:

157 N DIVISION ST
OVIEDO, FL 32765 US

New Principal Place of Business:

157 OVIEDO BOULEVARD
OVIEDO, FL 32765 US

Current Mailing Address:

157 N DIVISION ST
OVIEDO, FL 32765 US

New Mailing Address:

157 OVIEDO BOULEVARD
OVIEDO, FL 32765 US

FEI Number: 59-3587954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, VICTOR
2734 WILLOW CREEK DRIVE
OVIEDO, FL 32765 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: REV () Delete
Name: BLAIR, VICTOR
Address: 2734 WILLOW CREEK DR
City-St-Zip: OVIEDO, FL 32765

Title: MR () Delete
Name: MOSES, CLAFTON
Address: 1028 BECKSTROM DR
City-St-Zip: OVIEDO, FL 32765

Title: MRS () Delete
Name: LEWIS, VIOLET
Address: 175 REED AVENUE
City-St-Zip: OVIEDO, FL 32765

Title: MR () Delete
Name: JONES, BENJAMIN
Address: PO BOX 1197
City-St-Zip: GENEVA, FL 32732

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: MRS (X) Change () Addition
Name: LEWIS, VIOLET
Address: 221 DENISE STREET
City-St-Zip: OVIEDO, FL 32765

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 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: MARC Q. DOUGLAS

MR.

01/10/2007

Electronic Signature of Signing Officer or Director

Date