

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2005 8:00 am
Secretary of State

07-15-2005 90019 012 ****61.25

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1. Entity Name
HEART FOR CHRIST FELLOWSHIP, INC.



Principal Place of Business
**202 WEST PANAMA ROAD
WINTER SPRINGS, FL 32708**

Mailing Address
**P.O. BOX 196185
WINTER SPRINGS, FL 32708**

20064003



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07112005 Chg-NP CR2E037 (10/03)

4. FEI Number
27-0045233

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GROCE, MATTHEW
202 WEST PANAMA ROAD
WINTER SPRINGS, FL 32708**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME **BALAGIA, HARDY B**
STREET ADDRESS **508 MARK RUN**
CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE D ☐ Delete
NAME **ADAMS, FRANCIS D**
STREET ADDRESS **502 MURPHY ROAD**
CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE D ☒ Delete
NAME **HAMLIN, KENNETH E**
STREET ADDRESS **1441 JAMIE LANE**
CITY-ST-ZIP **CASSELBERRY, FL 32707**

TITLE D ☐ Delete
NAME **RICHARDS, LORILYNN P**
STREET ADDRESS **204 SWEETGUM COURT**
CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE D ☐ Delete
NAME **BALAGIA, KELLY A**
STREET ADDRESS **508 MARK RUN**
CITY-ST-ZIP **WINTER SPRINGS, FL 32708**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME **SCHOCK, TIMOTHY B.**
STREET ADDRESS **10460 EPIPHYTE ROAD (Epiphyte Road)**
CITY-ST-ZIP **MIMS, FL 32754**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Hardy B Balagia **HARDY B BALAGIA** 7/11/05

407 6657379

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #