

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009693

FILED  
May 03, 2007  
Secretary of State

**Entity Name:** HERCULES AVENUE CHURCH OF CHRIST AT CLEARWATER, INC.

**Current Principal Place of Business:**

601 S HERCULES AVE  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

601 S HERCULES AVE  
CLEARWATER, FL 33764

**New Mailing Address:**

**FEI Number:** 11-3719100      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

TODD, EDWARD  
10360 BLOSSOM LAKE DR  
SEMINOLE, FL 33772      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:**

Title: CD      ( ) Delete  
Name: HARBIG, NEIL S  
Address: 2250 JAFFA PLACE  
City-St-Zip: CLEARWATER, FL 33764

Title: TD      ( ) Delete  
Name: TODD, EDWARD T  
Address: 10360 BLOSSOM LAKE DR  
City-St-Zip: SEMINOLE, FL 33772

Title: SD      ( ) Delete  
Name: WHITESIDE, DONALD G  
Address: 7070 DELTA WAY  
City-St-Zip: CLEARWATER, FL 33764

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD T. TODD

TD

05/03/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date