


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90547 037 ****61.25

DOCUMENT # N04000004362 1. Entity Name THE CHURCH HOUSE, INC			
Principal Place of Business 215 GARDEN COVE COURT ORLANDO, FL 32835		Mailing Address 215 GARDEN COVE COURT ORLANDO, FL 32835	
2. Principal Place of Business 119-C Georgetown Dr Suite, Apt. #, etc.		3. Mailing Address 119-C Georgetown Dr. Suite, Apt. #, etc.	
City & State Casselberry Zip 32707		City & State Casselberry Zip 32707	
Country Sennoic		Country Sennoic	
4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZANDERS, BETTY B 215 GARDEN COVE COURT ORLANDO, FL 32835		7. Name and Address of New Registered Agent 119-C Georgetown Dr Casselberry, FL 32707	
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 Betty Zanders <i>Betty Zanders, Registered Agent</i> 04/25/2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ZANDERS, BETTY B 215 GARDEN COVE COURT ORLANDO, FL 32835	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARTER, RODDELL R 215 GARDEN COVE COURT ORLANDO, FL 32835	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADV THOMAS, TORRY 1907 IVEY LANE ORLANDO, FL 32835	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SULLIVAN, CLARA C 215 GARDEN COVE COURT ORLANDO, FL 32835	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA BICKHAM, ANGIE C 215 GARDEN COVE COURT ORLANDO, FL 32835	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: Betty Zanders, President Betty Zanders 04/25/2005 407-260-0493 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			