

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

FILED

**Apr 26, 2007 08:00 AM
Secretary of State**

DOCUMENT # N04452

1. Entity Name
**THE SOUTHEAST COAST REGION OF THE FELLOWSHIP
OF BIBLE CHURCHES INC.**



Principal Place of Business
**1400 CR 17-A, NORTH
AVON PARK, FL 33825 US**

Mailing Address
**1400 CR 17-A, NORTH
AVON PARK, FL 33825 US**



04232007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 35-1144892	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHANKWEILER, THOMAS
1400 CR 17A NORTH LOT 82
AVON PARK, FL 33825**

**DO NOT WRITE
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:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

1. 9. Election Campaign Financing
Trust Fund Contribution ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHANKWEILER, THOMAS
1400 CR 17A NORTH, LOT 82
AVON PARK, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
UPTON, MARY R
1400 CR 17A NORTH LOT 61
AVON PARK, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
HANN, AMOS E
1100 LANGLEY COURT
COLUMBIA, SC**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
STOVER, HAROLD
RT 2, BOX 151-A
BLYTHEWOOD, SC**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000735022
05/10/07-80017-006 61.25

**DO NOT WRITE
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:

MARY R. UPTON MARY R. UPTON

4/23/07

863-452-5643

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #