

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000968

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CHURCH OF THE HIGHLANDS PORT ORANGE, INC.

**Current Principal Place of Business:**

1648 TAYLOR RD #403  
PORT ORANGE, FL 32128

**New Principal Place of Business:**

**Current Mailing Address:**

1648 TAYLOR RD #403  
PORT ORANGE, FL 32128

**New Mailing Address:**

**FEI Number:** 26-0103572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEHON, MIKE  
3859 SUNSET COVE DR  
PORT ORANGE, FL 32129 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:** P  
**Name:** SEHON, MIKE  
**Address:** 6138 SABAL POINT CIRCLE  
**City-St-Zip:** PORT ORANGE, FL 32128

**Title:** VP  
**Name:** FLORES, SAM  
**Address:** 6255 S. WILLIAMSON BLVD APT 1317  
**City-St-Zip:** PORT ORANGE, FL 32128

**Title:** S  
**Name:** SIMCOX, BOB  
**Address:** 3939 S ATLANTIC AVE UNIT A  
**City-St-Zip:** PORT ORANGE, FL 32127

I hereby 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 all other like empowered.

**SIGNATURE:** MIKE SEHON

P

04/30/2012

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

\_\_\_\_\_  
Date