

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

DOCUMENT # N05000003314

1. Entity Name  
HEDGE HIGHWAY EVANGELISTIC ASSOCIATION, INC.



**FILED  
Apr 11, 2007 8:00 am  
Secretary of State**

04-11-2007 90032 035 \*\*\*\*70.00

Principal Place of Business  
ATTN: JANELLE C. COOK  
5635 SE GREENS LN  
STUART, FL 34997

Mailing Address  
ATTN: JANELLE C. COOK  
5635 SE GREENS LN  
STUART, FL 34997

**DO NOT WRITE IN THIS SPACE**

03182007 No Chg-NP CR2E037 (4/06)

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

6. Name and Address of Current Registered Agent

PORTER, DONNA  
228 SW 1ST AVE  
DELRAY BCH, FL 33444

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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 remitting)

DATE

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

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTD  
NAME COOK, JANELLE C  
STREET ADDRESS 5635 SE GREENS LN  
CITY-ST-ZIP STUART, FL 34997

TITLE VD  
NAME HALL, WARD G  
STREET ADDRESS P.O.BOX 1506  
CITY-ST-ZIP JENSEN BCH, FL 34958

TITLE SD  
NAME PORTER, DONNA  
STREET ADDRESS 228 SW 1ST AVE  
CITY-ST-ZIP DELRAY BCH, FL 33444

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:** Ward H. Hall (WARD G. HALL), VD 4/3/07 (772)287-8780  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



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IN THIS SPACE**

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