

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000110

FILED  
Jul 27, 2007  
Secretary of State

**Entity Name:** CHURCH OF THE HIGHLANDS FOUR CORNERS, INC.

**Current Principal Place of Business:**

P.O. BOX 2867  
DAVENPORT, FL 338362867

**New Principal Place of Business:**

705 INGRAHAM AVE  
SUITE 4  
HAINES CITY, FL 33844

**Current Mailing Address:**

P.O. BOX 2867  
DAVENPORT, FL 338362867

**New Mailing Address:**

**FEI Number:** 83-0444340      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

A1A REGISTERED AGENT INC.  
92 SADBERRY ROAD  
QUINCY, FL 32351      US

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

CONNER, RICHARD A  
162 RONA LANE  
DAVENPORT, FL 33896      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: RICC CONNER

07/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: HALLER III, HAL M  
Address: 6330 ASHLEY DRIVE  
City-St-Zip: LAKELAND, FL 33803

Title: DV      ( ) Delete  
Name: CONNER JR., RICHARD  
Address: 163 RONA LANE  
City-St-Zip: DAVENPORT, FL 33837

Title: S      ( ) Delete  
Name: PATTERSON, CLINT  
Address: 257 JESSAMINE DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: DT      ( ) Delete  
Name: FOSTER, GLEN  
Address: 636 ASTER DRIVE  
City-St-Zip: DAVENPORT, FL 33897

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

Title: DP      (X) Change ( ) Addition  
Name: CONNER, RICHARD A MR.  
Address: 162 RONA LANE  
City-St-Zip: DAVENPORT, FL 33896

Title: DVDT      (X) Change ( ) Addition  
Name: GOFF, CHARLES A MR  
Address: 855 S. BROADWAY AVE  
City-St-Zip: BARTOW, FL 33830

Title: S      (X) Change ( ) Addition  
Name: FOSTER, GLEN MR  
Address: 636 ASTER DRIVE  
City-St-Zip: DAVENPORT, FL 33897

Title: S      (X) Change ( ) Addition  
Name: BURKS, MATTHEW MR  
Address: 33 LAKE LINK CIRCLE SE  
City-St-Zip: WINTER HAVEN, FL 33884

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: C ANTHONY GOFF

DV

07/27/2007

Electronic Signature of Signing Officer or Director

Date