

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000621

FILED  
Feb 20, 2009  
Secretary of State

**Entity Name:** THE NEW CHURCH AT LAKE HELEN, INC.

**Current Principal Place of Business:**

145 N. EUCLID AVENUE  
LAKE HELEN, FL 32744

**New Principal Place of Business:**

**Current Mailing Address:**

145 N. EUCLID AVENUE  
LAKE HELEN, FL 32744

**New Mailing Address:**

**FEI Number:** 23-1445615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLE, MICHAEL S  
362 TRAVINO AVENUE  
ST AUGUSTINE, FL 32086 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: TP ( ) Delete  
Name: COLE, MICHAEL S  
Address: 362 TRAVINO AVENUE  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: TT ( ) Delete  
Name: FURRY, JOHN W  
Address: 451 MONTANA AVE  
City-St-Zip: DAVENPORT, FL 33897

Title: T ( ) Delete  
Name: ZEITZ, WILLIAM R  
Address: 2465 EAST LAKE DRIVE  
City-St-Zip: DELAND, FL 32724

Title: S ( ) Delete  
Name: FURRY, LOIS  
Address: 702 MONTANA AVE  
City-St-Zip: DAVENPORT, FL 33897

Title: T ( ) Delete  
Name: JACQUIE, JOHNS  
Address: 467 QUEENSBRIDGE DRIVE  
City-St-Zip: LAKE MARY, FL 32746

Title: T ( ) Delete  
Name: MORRIS, BRENT  
Address: 264 KICKLIGHTER ROAD  
City-St-Zip: LAKE HELEN, FL 32744

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRENT MORRIS

T

02/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date