

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 01, 2008 8:00 am**  
**Secretary of State**

02-01-2008 90019 019 \*\*\*\*61.25

<b>DOCUMENT # N06000010570</b> 1. Entity Name <b>HIGHPOINT COMMUNITY CHURCH OF ORANGE PARK, INC.</b>					
Principal Place of Business <b>1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073</b>			Mailing Address <b>1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073</b>		
2. Principal Place of Business - No P.O. Box # <b>84 Knight Boxx Rd.</b> Suite, Apt. #, etc.		3. Mailing Address <b>84 Knight Boxx Rd.</b> Suite, Apt. #, etc.			
City & State <b>Orange Park, FL</b>		City & State <b>Orange Park, FL</b>		4. FEI Number <b>51-0606121</b>	
Zip <b>32065</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>STYRON, JEFFREY W 1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>84 Knight Boxx Rd.</b> City <b>Orange Park</b> <b>FL</b> Zip Code <b>32065</b>	
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: <u><i>Jeffrey W. Styron</i></u> <b>JEFFREY W. STYRON</b> <span style="float: right;">1/27/08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STYRON, JEFFREY W 1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>84 Knight Boxx Rd. Orange Park, FL 32065</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANYON, LESLIE F 1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>84 Knight Boxx Rd. Orange Park, FL 32065</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAILEY, MICHAEL 1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>84 Knight Boxx Rd. Orange Park, FL 32065</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANCISCO, LISA R 1542 KINGSLEY AVE STE 136 ORANGE PARK, FL 32073	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>84 Knight Boxx Rd. Orange Park, FL 32065</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> <u><i>J. Michael Hailey</i></u> <b>J. Michael Hailey</b> <span style="float: right;">1/28/08 904-272-7949</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					