

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 07, 2008 8:00 am**  
**Secretary of State**

01-07-2008 90043 002 \*\*\*\*70.00

**DOCUMENT # N07000002273**

1. Entity Name  
FLORIDA HIGHLANDS BAPTIST CHURCH, INC.



Principal Place of Business  
9684 SW 155TH STREET  
DUNNELLON, FL 34432

Mailing Address  
9684 SW 155TH STREET  
DUNNELLON, FL 34432

40000450



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01022008

Chg-NP

CR2E037 (12/06)

4. FEI Number

36-460-4660

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

COLLEY, STEVEN C  
11700 SW 150TH STREET  
DUNNELLON, FL 34432

7. Name and Address of New Registered Agent

Name Kevin C Means

Street Address (P.O. Box Number is Not Acceptable)  
9970 SW 153 Lane

City Dunnellon

FL

Zip Code 34432

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

*Kevin C Means*  
Signature, typed or printed name of registered agent and title if applicable.

Kevin C. Means - Director

1/3/08

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$61.25  
Due by May 1, 2008

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
NAME COLLEY, STEVEN R  
STREET ADDRESS 8995 SW 156TH PLACE  
CITY-ST-ZIP DUNNELLON, FL 34432

TITLE DVP ☒ Delete  
NAME GILLEN, RICHARD L  
STREET ADDRESS 6261 SW 104TH LANE  
CITY-ST-ZIP OCALA, FL 34476

TITLE DP ☒ Delete  
NAME ADAMS, RONALD J  
STREET ADDRESS 5908 SW 112TH PLACE ROAD  
CITY-ST-ZIP OCALA, FL 34476

TITLE S ☒ Delete  
NAME ADAMS, ANN M  
STREET ADDRESS 9684 SW 155TH STREET  
CITY-ST-ZIP DUNNELLON, FL 34432

TITLE T ☐ Delete  
NAME MEANS, LORRAINE A  
STREET ADDRESS 9970 SW 153RD LANE  
CITY-ST-ZIP DUNNELLON, FL 34432

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition  
NAME Kevin C. Means  
STREET ADDRESS 9970 SW 153 Lane  
CITY-ST-ZIP Dunnellon, FL 34432

TITLE DVP ☒ Change ☐ Addition  
NAME Trudie Callihan  
STREET ADDRESS 8755 SW 155 St  
CITY-ST-ZIP Dunnellon, FL 34432

TITLE DP ☒ Change ☐ Addition  
NAME Grover D. Davis  
STREET ADDRESS 8271 SW 158 Lane  
CITY-ST-ZIP Dunnellon, FL 34432

TITLE S ☒ Change ☐ Addition  
NAME Carol Hendrix  
STREET ADDRESS 10285 SW 156 Place  
CITY-ST-ZIP Dunnellon, FL 34432

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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:

*Kevin C Means*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin C. Means

1/3/2008

352-861-3898

Date

Daytime Phone #