## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17153

FILED Jan 04, 2007 Secretary of State

Entity Name: PINE HILLS COMMUNITY CHURCH, INCORPORATED

		of Business:	New Principal Plac	e or business:	
305 N. P	ANTHONY JOH INE HILLS RD. O, FL 32808	HNSON			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
305 N. P	ANTHONY JOH INE HILLS RD. O, FL 32808	HNSON			
El Numbe	r: 59-2601354	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
305 N PI	N, ANTHONY I NE HILLS RD. O, FL 32808	REV. US			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or bot	
SIGNATU	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
itle: lame: \ddress:	T () SLEDGE, JOSH 2230 OKADA C	IRCLE	Title: Name: Address:	( ) Change ( ) Addition	
	ORLANDO, FL	32818	City-St-Zip:		
city-St-Zip: Title: lame: address: City-St-Zip:	ORLANDO, FL	Delete	City-St-Zip: Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
city-St-Zip: itle: lame: address:	ORLANDO, FL  CBT ( ) SIMS, JAMES 3510 N. POWE ORLANDO, FL	Delete RS DRIVE 32818 Delete R, TERRY ST PLACE	Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
City-St-Zip:  Title:  Jame:  Jame:  Jame:  Jame:  Jame:  Jame:  Jame:  Jame:  Jame:	ORLANDO, FL  CBT ( ) SIMS, JAMES 3510 N. POWE ORLANDO, FL  T ( ) CHRISTOPHER 19 PINE FORE: APOPKA, FL 3	Delete RS DRIVE 32818 Delete R, TERRY ST PLACE 2712 Delete ERLY DOD COURT	Title: Name: Address: City-St-Zip: Title: Name: Address:		
City-St-Zip:  Title:  Jame:  Jame:	ORLANDO, FL  CBT ( ) SIMS, JAMES 3510 N. POWE ORLANDO, FL  T ( ) CHRISTOPHER 19 PINE FORE: APOPKA, FL 3  T ( ) GORDON, BEV 1830 FRUITWO ORLANDO, FL	Delete RS DRIVE 32818 Delete R, TERRY ST PLACE 2712 Delete ERLY DOD COURT 32818 Delete RRLES DD ST.	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY JOHNSON REV. 01/04/2007