

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 17, 2006
Secretary of State

DOCUMENT# N30379

Entity Name: HIGHLAND AVENUE CHURCH OF CHRIST, INCORPORATED**Current Principal Place of Business:**2800 W. HIGHLAND AVE.
TAMPA, FL 336021418 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 75436
TAMPA, FL 33675**New Mailing Address:****FEI Number:** 59-3002528**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TRONE, ORUM JR
1253 CORD GRASS CT.
ZEPHYRHILLS, FL 33543 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:** TD () Delete
Name: PETERSON DOWAYNE SR.,
Address: 451 SUMMER SAILS DRIVE
City-St-Zip: VALRICO, FL 33594**Title:** D () Delete
Name: BELL, BOBBY
Address: 6909 ST. JOHN RIVER DRIVE #101
City-St-Zip: TAMPA, FL 33617**Title:** PD () Delete
Name: TRONE, ORUM JR
Address: 1253 CORD GRASS COURT
City-St-Zip: WESLEY CHAPEL, FL**Title:** DS () Delete
Name: BESS, CLARENCE,
Address: 3204 N. 44TH ST.
City-St-Zip: TAMPA, FL**Title:** D () Delete
Name: LOWE, JOE
Address: 211 WEST GLADYS
City-St-Zip: TAMPA, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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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 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: DOWAYNE PETERSON SR.

TD

06/17/2006

Electronic Signature of Signing Officer or Director_____
Date