

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90027 029 ****70.00

DOCUMENT # N38639

1. Entity Name
HASTINGS COMMUNITY CHURCH, INC.



Principal Place of Business
**307 COCHRAN ST
HASTINGS, FL 32145 US**

Mailing Address
**PO BOX 1042
HASTINGS, FL 32145 US**

50007196



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03272006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-3010146

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GROOMS, LIDIA V
159 PRIDGEON ST
INTERLACHEN, FL 32148**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
GROOMS, LIDIA V
159 PRIDGEON ST
INTERLACHEN, FL 32148 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BADGER, JESSICA
2129 OLD TYME AVE
SAINT AUGUSTINE, FL 32084 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BADGER, JESSICA
2109 OLD TYME AVE.
SAINT AUGUSTINE, FL 32084 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BUTLER, JENNIFER
10135 BECKENGER AVE
HASTINGS, FL 32145 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LEONARD, KEITH
101 DELLWOOD AVE
PALATKA, FL 32177 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
MILLER, HELEN
299 VENTURE RD
SAINT AUGUSTINE, FL 32080 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASTERS, VICTOR
7345 CR 13 S
HASTINGS, FL 32145 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SIMMS, DEANNA
110 PHOENETIA DR
SAINT AUGUSTINE, FL 32086 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SIMMS, DEANNA
4705 NAOMI ST.
HASTINGS, FL 32145 ☒ Change ☐ 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Lidia V Grooms **LIDIA V GROOMS (TD)** 3.27.06 380-684-6405