

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # N43436

1. Entity Name
FT. DRUM COMMUNITY CHURCH, INC.



Principal Place of Business
**32415 ROUTE 441 NORTH
FT. DRUM COMMUNITY, FL 34972**

Mailing Address
**32415 ROUTE 441 NORTH
FT. DRUM COMMUNITY, FL 34972**



01292007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2752744

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HUNTER, E. T.
1930 TYLER ST.
HOLLYWOOD, FL 33020**

**DO NOT WRITE
IN THIS SPACE**

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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000614480
02/06/07-80033-001 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/TR
TERRY, SANDRA
34145 NW 29TH AVE
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
WATSON, DWAN
655 NE 361ST CT
OKEECHOBEE, FL 34972**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
WELCH, JUDITH
2151 NW 399TH ST.
OKEECHOBEE, FL 34972**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
FORREST, TERRY
34145 NW 29TH AVE
OKEECHOBEE, FL 34974**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
HOGLO, JOHN
12150 NE 22ND AVE.
OKEECHOBEE, FL 34972**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: *Sandra Terry* **Sandra TERRY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-07

Date

863-467-1733

Daytime Phone #