

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90267 050 ****61.25

DOCUMENT # N50243

1. Entity Name
HOWEY-IN-THE-HILLS COMMUNITY CHURCH, FLORIDA CORPORATION



Principal Place of Business
**420 NORTH PALM AVENUE
HOWEY-IN-THE-HILLS, FL 34737**

Mailing Address
**420 NORTH PALM AVENUE
HOWEY-IN-THE-HILLS, FL 34737**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-1117563

Applied For
☐ Not Applicable

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

**REMINGTON, ED
119 HIBISCUS WAY
LEESBURG, FL 34748**

Name **Lynda Childs**
Street Address (P.O. Box Number is Not Acceptable)

407 Orchid Way
City **Howey-in-Hills FL** Zip Code **34734**

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

Lynda Childs

Lynda Childs

4-27-04

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, 2004

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 **D** ☒ Delete
NAME **MERRELL, ROBERT**
STREET ADDRESS **4144 BAIR AVE**
CITY-ST-ZIP **FRUITLAND PARK, FL**

TITLE **Joseph Hammill** ☐ Change ☒ Addition
NAME **107 E. Laurel**
STREET ADDRESS **Howey-in-Hills, FL 34737**
CITY-ST-ZIP

TITLE **PD** ☒ Delete **NO**
NAME **REMINGTON, ED**
STREET ADDRESS **119 HIBISCUS WAY**
CITY-ST-ZIP **LEESBURG, FL 34748**

TITLE **Carol Kaelin** ☐ Change ☒ Addition
NAME **5734 King James Ave**
STREET ADDRESS **Leesburg, FL 34737**
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **CROWDER, DANIEL**
STREET ADDRESS **12106 BRUCE HUNT RD**
CITY-ST-ZIP **CLERMONT, FL**

TITLE **James Bassett** ☐ Change ☒ Addition
NAME **1004 N. Tangerine**
STREET ADDRESS **Howey-in-Hills, FL 34737**
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **CARDINER, LEONA**
STREET ADDRESS **23130 BROUWER TOWN RD.**
CITY-ST-ZIP **HOWEY IN THE HILLS, FL 34737**

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

TITLE **T** ☐ Delete
NAME **MANNING, LASLIE**
STREET ADDRESS **111 E HOLLY AVENUE**
CITY-ST-ZIP **HOWEY IN THE HILLS, FL 34737**

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

TITLE **T** ☒ Delete
NAME **KYLE, BUD**
STREET ADDRESS **5639 MARY&VILLA RD.**
CITY-ST-ZIP **GROVELAND, FL 34736**

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 exemption stated in Section 119.07(3)(f), 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:

Lynda Childs