2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007
Secretary of State

DOCUMENT# N50243

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-1117563 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHILDS, LYNDA
407 ORCHID WAY
HOWEY IN THE HILLS, FL 34734 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:	D	( ) Delete
Name:	HAMMILL, JOSEPH	
Address:	107 E LAUREL	
City-St-Zip:	HOWEY IN THE HILLS, FL 34737	
Title:	PD	( ) Delete
Name:	FOLMSBEE, KENNETH S	
Address:	27114 ORANGE AVENUE	
City-St-Zip:	YALAHA, FL 34797	
Title:	T	( ) Delete
Name:	FOSTER, BILL	
Address:	107 TIMBER LANE	
City-St-Zip:	YALAHA, FL 34797	
Title:	T	( ) Delete
Name:	MANNING, LESLIE	
Address:	111 E. HOLLY STREET	
City-St-Zip:	HOWEY IN THE HILLS, FL 34737	
Title:	T	( ) Delete
Name:	HAWTHORNE, ROSIE	
Address:	5684 FREEPORT DRIVE	
City-St-Zip:	TAVARES, FL 32778	
Title:	T	( ) Delete
Name:	WARNER, PATRICIA	
Address:	317 E. CROTON	
City-St-Zip:	HOWEY IN THE HILLS, FL 34737	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	FOSTER, BILL	
Address:	107 TIMBER LANE	
City-St-Zip:	YALAHA, FL 34797	
Title:	D	(X) Change ( ) Addition
Name:	MCMAHON, MURRAY	
Address:	104 TIMBER LANE	
City-St-Zip:	YALAHA, FL 34797	
Title:	D	(X) Change ( ) Addition
Name:	HAWTHORNE, ROSIE	
Address:	5684 FREEPORT DRIVE	
City-St-Zip:	TAVARES, FL 32778	
Title:	D	(X) Change ( ) Addition
Name:	HOFFMAN, WALLACE	
Address:	3716 TIMBER LANE	
City-St-Zip:	LEESBURG, FL 34748	

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: LYNDA CHILDS T 02/26/2007

Electronic Signature of Signing Officer or Director — Date