

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50243

FILED
Mar 17, 2008
Secretary of State

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: YALAH, FL 34797

Title: D () Delete
Name: FOSTER, BILL
Address: 107 TIMBER LANE
City-St-Zip: YALAH, FL 34797

Title: D () Delete
Name: MCMAHON, MURRAY
Address: 104 TIMBER LANE
City-St-Zip: YALAH, FL 34797

Title: D () Delete
Name: HAWTHORNE, ROSIE
Address: 5684 FREEPORT DRIVE
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: HOFFMAN, WALLACE
Address: 3716 TIMBER LANE
City-St-Zip: LEESBURG, FL 34748

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: KONDO, STEPHANIE
Address: 115 E CROTON WAY
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: D (X) Change () Addition
Name: MILES, PAM
Address: 3400 SARATOGA DRIVE
City-St-Zip: TAVARES, FL 32778

Title: () Change () Addition
Name:
Address:
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 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 A. CHILDS

TREA

03/17/2008

Electronic Signature of Signing Officer or Director

Date