2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N94000001682

1. Entity Name

THE HIGHWAY APOSTLE FAITH CHURCH OF JESUS CHRIST, INC.

FILED Apr 03, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

701 NORTH 13TH STREET FORT PIERCE, FL

701 NORTH 13TH STREET FORT PIERCE, FL. 34950



DO NOT WRITE IN THIS SPACE

01152006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 65-0563403

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALKER, D.H.

701 NORTH 13TH STREET FT. PIERCE, FL 34590			IN THIS SPACE			
	named entity submits this statement for lons of registered agent.	the purpose of changing its registers	d office or r	egistered agent, or bot	th, in the State of Florida. I am familiar with, and eggept	
SIGNATURE Signature, typod or printed name of registered agont and title if applicable. (NOTE: Registered				Agant signature required when rehistating) OATE		
•	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000491035 04/19/06:80006-008 61,25	
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WALKER, D.H. 701 NORTH 13TH STREET FT. PIERCE, FL 34902					
TITLE HAME STREET ADDRESS CITY-ST-ZIP	SD HOWARD, MARY 1541 NW 33RD TERR FT LAUDERDALE, FL 33311					
NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, LEONARD 1277 NW 56 ST MIAMI, FL				NOT WRITE	
TITLE	ιτ ο	-		1741	ていら ぐひんへに	

IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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.

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE NAME STREET ADDRESS

CITY-ST-ZIP

CATY-ST-ZIP

WALKER, ANNETTE

HOWARD, FELTON

FT LAUDERDALE, FL

1541 NW 33 AVE

560 EAST CAMPUS CIR

FT LAUDERDALE, FL 33311