

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90238 046 ****61.25

DOCUMENT # N98000000550 1. Entity Name HERITAGE ASSEMBLY OF GOD, INC.					
Principal Place of Business 298 CROSSWAY RD TALLAHASSEE, FL 32305			Mailing Address 298 CROSSWAY RD TALLAHASSEE, FL 32305		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0760428	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BURDESHAW, ALICE H 10806 WOODVILLE HWY TALLAHASSEE, FL 32305				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BURDESHAW, REV. ALICE H		NAME		
STREET ADDRESS	10806 WOODVILLE HWY		STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE, FL 32305		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BROWNING, KATHY		NAME		
STREET ADDRESS	629 SHADEVILLE ROAD		STREET ADDRESS		
CITY-ST-ZIP	CRAWFORDVILLE, FL 32327		CITY-ST-ZIP		
TITLE	VT	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SCARBOROUGH, CHARLES		NAME	Stafford, Mable	
STREET ADDRESS	818 BRIANDAV STREET		STREET ADDRESS	1793 Bloxham Cutoff Rd.	
CITY-ST-ZIP	TALLAHASSEE, FL 32305		CITY-ST-ZIP	Crawfordville, FL 32327	
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STRICKLAND, BILLY		NAME	VT	
STREET ADDRESS	42 HOLIDAY DRIVE		STREET ADDRESS		
CITY-ST-ZIP	CRAWFORDVILLE, FL 32305		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CARROLL, JOSEPH		NAME		
STREET ADDRESS	301-2 ROSS ROAD		STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE, FL 32327		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BRYANT, PAUL		NAME	Blankenship, Gary	
STREET ADDRESS	175 MILLER ROAD		STREET ADDRESS	668 Old Woodville Hwy.	
CITY-ST-ZIP	HAVANA, FL 32333		CITY-ST-ZIP	Crawfordville, FL 32327	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Rev. Alice H. Burdeshaw</i> <i>Rev. Alice H. Burdeshaw</i> 4/20/05 80-656-125					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

% D 5 4 , , , , , 1 1 , D &

04202005 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

FL

Zip Code

VT

☒ Change

☐ Change

☐ Change

☐ Change