

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 30, 2006
Secretary of State

DOCUMENT# N98000001527

Entity Name: HOLIDAY COMMUNITY FELLOWSHIP CHURCH, INC.**Current Principal Place of Business:**4801 ANN DRIVE
HOLIDAY, FL 34690**New Principal Place of Business:**5144 SUNRAY DRIVE
HOLIDAY, FL 34690**Current Mailing Address:**5144 SUNRAY DR
HOLIDAY, FL 34690**New Mailing Address:****FEI Number:** 59-3501680**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WATT, RALPH J
2412 PRESTIGE DRIVE
HOLIDAY, FL 34690 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:** CD () Delete
Name: MILHOLIN, CLARK K
Address: 2715 JOANN PL.
City-St-Zip: HOLIDAY, FL 346913213**Title:** CD () Delete
Name: WATT, RALPH J
Address: 2412 PRESTIGE DR.
City-St-Zip: HOLIDAY, FL 34690**Title:** CD () Delete
Name: CLINK, LLOYD
Address: 6820 CRANBERRY DR.
City-St-Zip: NEW PORT RICHEY, FL 34653**Title:** CD (X) Delete
Name: WOOSTER, STELA
Address: 3320 ROCK VALLEY DR
City-St-Zip: HOLIDAY, FL 34691**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CD (X) Change () Addition
Name: MILHOLIN, CLARK K
Address: 2715 JOANN PL.
City-St-Zip: HOLIDAY, FL 34691**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** CD (X) Change () Addition
Name: WOOSTER, STELLA
Address: .3320 ROCK VALLEY DR
City-St-Zip: HOLIDAY, FL 34691**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: RALPH J. WATT

CD

08/30/2006

Electronic Signature of Signing Officer or Director

Date