2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 05, 2006
Secretary of State

DOCUMENT# N99000005833

Entity Name: HEAVENLY STARS OF CHRIST SABBATH KEEPERS CHURCH, INC.

Current Principal Place of Business:

813 N 13TH STREET
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

100 CAMELOT DRIVE
FORT PIERCE, FL 34946

New Mailing Address:

FEI Number: 65-0993578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JOHNSON, JAMES
100 CAMELOT DRIVE
FORT PIERCE, FL 34946 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: SD ( ) Delete
Name: JOHNSON, DIANE
Address: 100 CAMELOT DRIVE
City-St-Zip: FORT PIERCE, FL 34946

Title: PD ( ) Delete
Name: JOHNSON, BISHOP JAMES
Address: 100 CAMELOT DRIVE
City-St-Zip: FORT PIERCE, FL 34946

Title: D ( ) Delete
Name: SMITH, C W
Address: 5943 NW REBA CIRCLE
City-St-Zip: PORT ST. LUCIE, FL

Title: TD ( ) Delete
Name: SMITH, SHIRLEY
Address: 5943 NW REBA CIRCLE
City-St-Zip: PORT ST. LUCIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: DIANE JOHNSON SD 09/05/2006

Electronic Signature of Signing Officer or Director — Date