## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007088

FILED Jan 31, 2007 Secretary of State

Entity Name: THE CHURCH OF THE HOLY COMFORTER, INC.

Current Principal Place of Business: New Principal Place of Business:

803 WEST 4TH STREET SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

PO BOX 2574 SANFORD, FL 32772

FEI Number: 59-3533928 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COSTANTINO, FRANK BISHOP

2001 MERCY DR STE 101

ORLANDO, FL 32808 US

BARTH, MARK PRIEST
803 WEST 4TH STREET
SANFORD, FL 32771 US

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: REV MARK BARTH 01/31/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 PRES
 (X) Change ( ) Addition

 Name:
 COSTANTINO, FRANK BISHOP
 Name:
 BARTH, MARK PRIEST

 Address:
 2001 MERCY DR STE 101
 Address:
 803 WEST FOURTH STREET

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 SANFORD, FL 32771

Title: D () Delete Title: TRES (X) Change () Addition

 Name:
 BROWN, CHARLES
 Name:
 NIPPES, ROBERT

 Address:
 2011 MERCY DRIVE
 Address:
 430 WOODCREST ST.

 City-St-Zip:
 ORLANDO, FL 328085629
 City-St-Zip:
 WINTER SPRINGS, FL 32708

Title: D ( ) Delete Title: SEC (X) Change ( ) Addition Name: BARTH, MARK Name: BALOGH, NELLIE

Address: 500 SOUTH HOLLY AVENUE Address: 2006 SOUTH HOLLY AVENUE City-St-Zip: SANFORD, FL 32771 City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 COSTANTINO-BROWN, LORI
 Name:
 BRITT, FREDDIE

 Address:
 2001 MERCY DR STE 101
 Address:
 440 LAKESHORE DR.

 City-St-Zip:
 ORLANDO, FL 32808
 City-St-Zip:
 LAKE MARY, FL 32746

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: REV. MARK BARTH PRES 01/31/2007