

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 14, 2006 8:00 am**  
**Secretary of State**

08-14-2006 90040 017 \*\*\*\*70.00

**DOCUMENT # P19219**

1. Entity Name

THE "OPEN DOOR" MISSIONARY FELLOWSHIP, INC.



Principal Place of Business

7600 131ST ST. N.  
SEMINOLE FL 33776

Mailing Address

PO BOX 4248  
SEMINOLE FL 33775



2. Principal Place of Business

616 Lakeside Dr.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Seminole FL

City & State

Zip

33772

Country

USA

Zip

Country

4. FEI Number

36-3618858

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PETERS, HERBERT H  
8216 FOREST CIRCLE NORTH  
SEMINOLE FL

7. Name and Address of New Registered Agent

Name Peters, Herbert H.

Street Address (P.O. Box Number is Not Acceptable)

616 Lakeside Dr.

City Seminole

FL

Zip Code

33772

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

*Rev. Herbert H. Peters*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

Aug. 1, 2006

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME PETERS, HERBERT H ☐ Delete  
STREET ADDRESS 8216 FORREST CIRCLE NO.  
CITY - ST - ZIP SEMINOLE FL

TITLE D  
NAME HELLMINTOLLER, DAVID ☐ Delete  
STREET ADDRESS 201 164TH AVE.  
CITY - ST - ZIP ST. PETERSBURG FL

TITLE D  
NAME PETERS, REYNOLD RAY ☐ Delete  
STREET ADDRESS 12727-29TH ST W  
CITY - ST - ZIP BEACH PARK IL

TITLE DT  
NAME FERGUSON, JIM ☐ Delete  
STREET ADDRESS 1160 LINNS MILL RD.  
CITY - ST - ZIP TROY MO 63379

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

*Rev. Herbert H. Peters*

Rev. Herbert H. Peters Aug. 1/06 727-391-4292