

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 721684 (9)

LAKEVILLE ROAD BAPTIST CHURCH, INC. OF ORLANDO, FLORIDA



Principal Place of Business: 6817 LAKEVILLE ROAD ORLANDO FL 32818  
Mailing Address: 6817 LAKEVILLE ROAD ORLANDO FL 32818

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 405 Blue Bird Street		26 6817 Lakeville Road		09/13/1971		04/03/1995	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 Apopka, Florida		28 Orlando, Florida		23-7148135		Not Applicable	
24 32703		25 USA		29 32818		30 USA	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				\$5.00 May Be Added to Fees			
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CONNELL, RON 3200 OLD WINTER GARDEN ROAD #1714 OCOOE FL 34761				81 Name Hughes, James S.			
				82 Street Address (P.O. Box Number is Not Acceptable) 1704 Sprucewood Lane			
				83			
				84 City Orlando			
				FL 85 Zip Code 32818			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Hughes, James S. Deacon *James S. Deacon* 2/6/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	DC/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEBBER, ROBERT	1.2 NAME	Hughes, James
STREET ADDRESS	1808 LAKE LORINE RIVER	1.3 STREET ADDRESS	1704 Sprucewood Lane
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Orlando, Florida 32818
TITLE	DS <input checked="" type="checkbox"/> DELETE	2.1 TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCDANIEL, CHARLES	2.2 NAME	Anita Ackerman
STREET ADDRESS	3200 OLD WINTER GARDEN ROAD, #1924	2.3 STREET ADDRESS	8113 Meadowglen Drive
CITY-ST-ZIP	OCOOE FL	2.4 CITY-ST-ZIP	Orlando, Florida 32810
TITLE	DC <input checked="" type="checkbox"/> DELETE	3.1 TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CONNELL, RON	3.2 NAME	Laura I. Hughes
STREET ADDRESS	3200 OLD WINTER GARDEN ROAD, #1714	3.3 STREET ADDRESS	1704 Sprucewood Lane
CITY-ST-ZIP	OCOOE FL	3.4 CITY-ST-ZIP	Orlando, Florida 32818
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STOUT, JAMES	4.2 NAME	
STREET ADDRESS	16546 SEVENTH ST.	4.3 STREET ADDRESS	200001771862
CITY-ST-ZIP	MONTVERDE FL	4.4 CITY-ST-ZIP	-04/08/96--01024--008
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	***70.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Hughes, Laura I. *Laura I. Hughes* 2/6/96 (407) 521-8163

CR2E037 (12/95)