

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**  
May 01 1996 8:00 am  
Secretary of State

**DOCUMENT # 730108 (8)**  
1. Corporation Name  
**THE LAKE WORTH CHRISTIAN SCHOOL SOCIETY, INC.**



Principal Place of Business: 7592 HIGH RIDGE ROAD LANTANA FL 33462  
Mailing Address: 7592 HIGH RIDGE ROAD LANTANA FL 33462

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/29/1974</b>	3a. Date of Last Report <b>05/23/1995</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>59-0855397</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	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			
RINKER, DAVID 556 MUIRFIELD DRIVE ATLANTIS FL 33462				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature typed or printed name of registered agent and title of application (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FEKETE, KAY	12 NAME	D/YP Gilde, Randy
STREET ADDRESS	2292 NW 36TH ST	13 STREET ADDRESS	1181 S.W. 24th Ave.
CITY-ST-ZIP	BOCA RATON FL	14 CITY-ST-ZIP	Boynton Beach, FL 33426
TITLE	D <input checked="" type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRYAN, DONALD	22 NAME	D/T Rinker, David
STREET ADDRESS	916 SW 28TH CT	23 STREET ADDRESS	556 Muirfield Dr.
CITY-ST-ZIP	BOYNTON BEACH FL	24 CITY-ST-ZIP	Atlantis, FL 33462
TITLE	D/S <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DYKSTRA, BUB	32 NAME	
STREET ADDRESS	8135 B BRIDEWATER CT	33 STREET ADDRESS	
CITY-ST-ZIP	LAKE SHORES FL	34 CITY-ST-ZIP	
TITLE	D/P <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, RICK	42 NAME	
STREET ADDRESS	1926 W MEDITERRANEAN	43 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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: J. Richard Harris J. Richard Harris Date: 4/30/96  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)