

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 07, 2004  
Secretary of State**

DOCUMENT# 730108

Entity Name: THE LAKE WORTH CHRISTIAN SCHOOL SOCIETY, INC.

**Current Principal Place of Business:**

7592 HIGH RIDGE ROAD  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

7592 HIGH RIDGE ROAD  
BOYNTON BEACH, FL 33426

**New Mailing Address:**

FEI Number: 59-0855397      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

STOB, LEONARD  
7630 OAKBORO DR  
LAKE WORTH, FL 33467      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: DP      ( ) Delete  
Name: LIN, DAVID  
Address: 175 AUBURN DRIVE  
City-St-Zip: LAKE WORTH, FL 33460

Title: DT      ( ) Delete  
Name: COONETY, MICHAEL  
Address: 1701 13TH AVE NORTH  
City-St-Zip: LAKE WORTH, FL 33460

Title: DS      ( ) Delete  
Name: SCHOLL, GEORGE  
Address: 720 WINTERS STREET  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DV      ( ) Delete  
Name: MEERBEEK, KIM  
Address: 6716 HILLSIDE STREET  
City-St-Zip: LANTANA, FL 33462

Title: D      ( ) Delete  
Name: STOB, LEONARD  
Address: 7630 OAKBORO DR  
City-St-Zip: LAKE WORTH, FL 33467

**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:

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 Section 119.07(3)(i), 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: LEONARD STOB

D

01/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date