

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2007 08:00 AM
Secretary of State

DOCUMENT # 742312 1. Entity Name FIRST SOUTHERN BAPTIST CHURCH OF LADY LAKE, INC.	
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07162007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2276059	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SMITH, QUINDE 714 MCKENZIE STREET LEESBURG, FL 34748

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, QUINDE 714 MCKENZIE ST LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SMITH, EMORY 101 FERN DE LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ZAHN, DEBBIE 915 APRIL HILL DR LADY LAKE, FL 32158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANES, PAT 2509 TECUMSEH AVE LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DENBY, DELORES PO BOX 120-244 SKYLINE DR LADY LAKE, FL 32159
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000771332
08/03/07-80002-017 61.25

**DO NOT WRITE
IN THIS SPACE**

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: Debbie Zahn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/07 352-760-3924
Date Daytime Phone #