

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711902

Entity Name: LAKESIDE BAPTIST CHURCH OF PAHOKEE, INC.**Current Principal Place of Business:**3055 BACOM POINT ROAD
PAHOKEE, FL 33476**Current Mailing Address:**P.O. BOX 694
PAHOKEE, FL 33476**FEI Number: 59-2163400****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**HINES, HENRY B
2519 SW 14TH TERRACE
PAHOKEE, FL 33476 US*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**Officer/Director Detail :**

Title	DS
Name	HINES, KARLA
Address	2519 SW 14TH TERRACE
City-State-Zip:	PAHOKEE FL 33476

Title	D
Name	KELLY, BRYAN
Address	6112 S.E. 30TH PKWY
City-State-Zip:	OKEECHOBEE FL 34974

Title	TREASURER
Name	ANDERSEN, BRAD L
Address	2519 S.W. 14TH TERRACE
City-State-Zip:	PAHOKEE FL 33476

Title	PD
Name	HINES, HENRY B
Address	2519 SW 14TH TERRACE
City-State-Zip:	PAHOKEE FL 33476

Title	TRUSTEE
Name	BREEDEN, TOBY STERLING
Address	12161 EVERGLADES STREET
City-State-Zip:	CANAL POINT FL 33438

Title	MISSIONARY
Name	WRIGHT, RUSSELL
Address	3055 BACOM POINT RD
City-State-Zip:	PAHOKEE FL 33476

I hereby 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 all other like empowered.

SIGNATURE: BRAD ANDERSEN**TREASURER****02/05/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date