

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90182 010 ****66.25

DOCUMENT # 700967

1. Entity Name

CHURCH OF CHRIST LAKE WORTH INC.



DO NOT WRITE IN THIS SPACE

10016091

2. Principal Place of Business

CHURCH OF CHRIST

Suite, Apt. #, etc.

8708 N. ELKCAM BLVD.

City & State

DUNNELLON, FLORIDA

Zip

34433

Country

US

3. Mailing Address

CHURCH OF CHRIST

Suite, Apt. #, etc.

8708 N. ELKCAM BLVD.

City & State

DUNNELLON, FLORIDA

Zip

34433

Country

US

4. FEI Number

59-6554159

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

VICTOR R. JARRELL

Street Address (P.O. Box Number is Not Acceptable)

8708 N. ELKCAM BLVD.

City

DUNNELLON,

FL

Zip Code

34433

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 VICTOR R. JARRELL 1/29/03

Signature, typed or printed name of registered agent and title if applicable.

Victor R. Jarrell

1/29/03

(NOTE: Registered Agent Signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	JARRELL, MICHAEL
STREET ADDRESS	RR. 13 BOX 278
CITY-ST-ZIP	LAKE CITY FLORIDA 32055
TITLE	PD
NAME	JARRELL, VICTOR R.
STREET ADDRESS	8708 N. ELKCAM BLVD
CITY-ST-ZIP	DUNNELLON, FLORIDA 34433
TITLE	SD
NAME	JARRELL, LINDA L.
STREET ADDRESS	8708 N. ELKCAM BLVD.
CITY-ST-ZIP	DUNNELLON, FLORIDA 34433
TITLE	
NAME	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR R. JARRELL 1/28/03

Victor R. Jarrell 1/28/03 352-489-

CR2E037B (12/02)