

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701334

FILED
Jan 14, 2004
Secretary of State

Entity Name: THE LAKE REGION UNITARIAN FELLOWSHIP INC

Current Principal Place of Business:

3140 TROY AVENUE
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

3140 TROY AVENUE
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 65-0556234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R. H. BAUM
3140 TROY AVE
LAKELAND, FL 33803 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: T () Delete
Name: BODE, JOYCE L
Address: 4906 COLONNADES CIRCLE E
City-St-Zip: LAKELAND, FL 33811

Title: BMT () Delete
Name: SCHMIDT, KENNETH
Address: 165 W CHRISTINA BLVD
City-St-Zip: LAKELAND, FL 33813

Title: VPT () Delete
Name: MITCHELL, SUE
Address: 2918 FOREST CLUB DR
City-St-Zip: PLANT CITY, FL 33567

Title: PT () Delete
Name: WOLITZ, LAWERENCE
Address: 3527 HIGHLAND FAIRWAYS BLVD
City-St-Zip: LAKELAND, FL 33810

Title: () Delete
Name:
Address:
City-St-Zip:

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: T () Change (X) Addition
Name: DAVIS, KENNETH E
Address: 563 PETREL CIRCLE
City-St-Zip: LAKELAND, FL 33809

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: JOYCE L. BODE

T

01/14/2004

Electronic Signature of Signing Officer or Director

Date