

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701400

FILED
Sep 03, 2008
Secretary of State

Entity Name: LAKEWOOD UNITED CHURCH OF CHRIST, INC.

Current Principal Place of Business:

2601 54TH AVE. S.
SAINT PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

2601 54TH AVE. S.
SAINT PETERSBURG, FL 33712

New Mailing Address:

FEI Number: 59-1234689 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WELLS, KIM (REV.)
1818 FOLLOW THRU RD NORTH
ST PETERSBURG, FL 33710 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RITTER, DENISE
Address: 632 JASMINE WAY SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: P () Delete
Name: BYRD, MARY
Address: 2237 BONITA WAY S
City-St-Zip: ST PETERSBURG, FL 33712

Title: D () Delete
Name: KASPAR, EVELYN
Address: 2993 61ST AVE. SO
City-St-Zip: ST PETERSBURG, FL

Title: D () Delete
Name: NIJBROEK, ROBIN
Address: 2851 12TH AVE. N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: T () Delete
Name: TIERNAN, ZULY
Address: 655 33RD AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33704

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 exemption stated 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 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: WELLS, KIM (REV.)

D

09/03/2008

Electronic Signature of Signing Officer or Director

Date