


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90037 027 ****61.25

DOCUMENT # 701435	
1. Entity Name WESTWOOD LAKE CHURCH OF CHRIST, INC.	

Principal Place of Business 1800 E MOWRY DRIVE HOMESTEAD, FL 33033	Mailing Address 1111 K ADAMS AVE HOMESTEAD, FL 33084
--	--

DO NOT WRITE IN THIS SPACE



01082008 No Chg-NP CR2E037 (4/06)

4. FEI Number 05-1600082	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CASTEL, GARY B
12016 SW 132 COURT
MIAMI, FL 33186

**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 _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

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	PD WALLACE, MARK 1111 K ADAMS AVE HOMESTEAD, FL 33084 <i>33034</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASTEL, GARY 3276 HAWKS NEST DR KISSIMMEE, FL 32741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATHERLEY, FRANK 409 CLASSIC DRIVE SODDY DAISY, TN 37379
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ORLANDO, LOLO 1413 SE LEGACY COVE CIRCLE STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WEETMAN, JOHN 1713 EGRET RD HOMESTEAD, FL 33035
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HATLEY, DON 21002 SW 97 PLACE <i>21320 SW 240 St</i> MIAMI, FL 33189 <i>Miami, FL 33031</i>

**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: *Mark Wallace* **MARK WALLACE** *4/12/08* *305-246-2443*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #