

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701435

FILED
Apr 06, 2009
Secretary of State

Entity Name: WESTWOOD LAKE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

1800 E MOWRY DRIVE
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

1111 K ADAMS AVE
HOMESTEAD, FL 33084

New Mailing Address:

FEI Number: 05-1600082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTEL, GARY B
12016 SW 132 COURT
MIAMI, FL 33186 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: PD () Delete
Name: WALLACE, MARK
Address: 1111 K ADAMS AVE
City-St-Zip: HOMESTEAD, FL 33034

Title: D () Delete
Name: CASTEL, GARY
Address: 3276 HAWKS NEST DR
City-St-Zip: KISSIMMEE, FL 32741

Title: D () Delete
Name: MATHERLEY, FRANK
Address: 409 CLASSIC DRIVE
City-St-Zip: SODDY DAISY, TN 37379

Title: SD () Delete
Name: ORLANDO, LOLO
Address: 1413 SE LEGACY COVE CIRCLE
City-St-Zip: STUART, FL 34997

Title: TD () Delete
Name: WEETMAN, JOHN
Address: 1713 EGRET RD
City-St-Zip: HOMESTEAD, FL 33035

Title: VD () Delete
Name: HATLEY, DON
Address: 21320 SW 240 ST
City-St-Zip: MIAMI, FL 33031

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:

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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: MARK WALLACE

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date