



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # 711128 1. Entity Name CLEVELAND HEIGHTS BAPTIST CHURCH, INC.	
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Principal Place of Business 3120 CLEVELAND HEIGHTS BLVD. LAKELAND, FL 33803	Mailing Address 3120 CLEVELAND HEIGHTS BLVD. LAKELAND, FL 33803
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DO NOT WRITE IN THIS SPACE

	
04172008 No Chg-NP	CR2E037 (4/06)
4. FEI Number 59-2662239	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 RADFORD, ERVIN 475 EIGHTY FOOT RD BARTOW, FL 33860

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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. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000913184 05/08/08-80006-003 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD RADFORD, ERVIN 475 EIGHTY FOOT RD . BARTOW, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VDS FLETCHER, HERBERT K. 3424 GROVEVIEW DR. LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HARRISON, GLORIA A 7320 FOREST WAY LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: Gloria A Harrison Gloria A Harrison 4-17-08 863-688-7131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #