

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 711277

FILED
Nov 02, 2009
Secretary of State

Entity Name: LAKE OLA BAPTIST CHURCH, INC.

Current Principal Place of Business:

6551 SADLER RD
P.O. BOX 221
ZELLWOOD, FL 32798

New Principal Place of Business:

6551 SADLER ROAD
ZELLWOOD, FL 32798 US

Current Mailing Address:

6551 SADLER RD
P.O. BOX 221
ZELLWOOD, FL 32798

New Mailing Address:

P.O. BOX 221
ZELLWOOD, FL 32798 US

FEI Number: 59-1156605 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:

MILLER, PAUL
5136 JONES AVE
ZELLWOOD, FL 32789 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: PAUL MILLER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: GREEN, RAY
Address: 5844 ROUND LAKE RD
City-St-Zip: APOPKA, FL 32712

Title: T (X) Delete
Name: MILLER, PAUL
Address: 5136 JONES AVE
City-St-Zip: ZELLWOOD, FL 32789

Title: T (X) Delete
Name: COOLEY, ESTEL
Address: 28208 TAMMI DR
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GREEN, RAY
Address: 5844 ROUND LAKE RD
City-St-Zip: APOPKA, FL 32712 US

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: PAUL MILLER

Electronic Signature of Signing Officer or Director

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11/02/2009

Date