


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90135 037 ****61.25

09/13/03

DOCUMENT # 712658
1. Entity Name
TEMPLE BAPTIST CHURCH, INC., LAKELAND, FLORIDA.



Principal Place of Business Mailing Address
4210 LAKELAND HIGHLANDS ROAD **4210 LAKELAND HIGHLANDS ROAD**
LAKELAND FL 33813 **LAKELAND FL 33813**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

4. FEI Number **59-1364210** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
~~KENNEDY, LELAND
4210 LAKELAND HIGHLANDS ROAD
LAKELAND FL 33813~~

7. Name and Address of New Registered Agent
Name John Richardson
Street Address (P.O. Box Number is Not Acceptable)
4210 Lakeland Highlands Road
City Lakeland FL Zip Code 33813

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 _____

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> Delete
NAME	GRANT, DAURICE A	
STREET ADDRESS	223 ANNE MARIE CIRCLE	
CITY-ST-ZIP	LAKELAND FL 33813	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	KENNEDY, LELAND	
STREET ADDRESS	4210 LAKELAND HIGHLANDS RD.	
CITY-ST-ZIP	LAKELAND FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	SANFORD, ROY E.	
STREET ADDRESS	719 BUTTERNUT PLACE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GRANT, BILL	
STREET ADDRESS	6229 WOODALE DR. S.	
CITY-ST-ZIP	LAKELAND FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	WAMSLEY, ROBERT H	
STREET ADDRESS	3821 WHITEDOVE DR	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MILLER, TOM	
STREET ADDRESS	5477 BEVERLY RISE BLVD.	
CITY-ST-ZIP	LAKELAND FL 33813	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Pastor	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John Richardson	
STREET ADDRESS	4210 Lakeland Highlands Rd	
CITY-ST-ZIP	Lakeland, FL 33813	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: John Richardson 9-5-03

CR2E037 (4/03)