

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713537

FILED
Jan 09, 2009
Secretary of State

Entity Name: LANTERN PARK BAPTIST CHURCH, INC.

Current Principal Place of Business:

LANTERN PARK BAPTIST CHURCH
239 S.E. LLEWELLYN AVE
LAKE CITY, FL 32025 US

New Principal Place of Business:

Current Mailing Address:

LANTERN PARK BAPTIST CHURCH
239 S.E. LLEWELLYN AVE
LAKE CITY, FL 32025 US

New Mailing Address:

FEI Number: 59-3720986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOWARD, NEAL
456 S.E. LLEWELLYN AVE
LAKE CITY, FL 32025 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: T () Delete
Name: CONWAY, ALVEN M
Address: 164 NW CORINTH DR
City-St-Zip: LAKE CITY, FL 32055

Title: D () Delete
Name: AMES, ROLAND H
Address: 280 S.W. WOODCREST DR
City-St-Zip: LAKE CITY, FL 32024

Title: T () Delete
Name: WILLIAMS, JOHN A
Address: 113 NE ROMAN TERRACE
City-St-Zip: LAKE CITY, FL 32055

Title: D () Delete
Name: DOUGLAS, C.F.
Address: 873 S.W. TROY ST.
City-St-Zip: LAKE CITY, FL 32055

Title: T () Delete
Name: SHAW, ROBERT E
Address: 150 S.E. WHEAT DR.
City-St-Zip: LAKE CITY, FL 32025

Title: S () Delete
Name: SINGLETARY, FRANK
Address: 157 SE CHURCH AVE
City-St-Zip: LAKE CITY, FL 32025

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:

Title: () Change () Addition
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City-St-Zip:

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: NEAL HOWARD

PAST

01/09/2009

Electronic Signature of Signing Officer or Director

Date