

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713880

FILED
Jan 07, 2009
Secretary of State

Entity Name: LAKEVIEW BAPTIST CHURCH OF DELRAY BEACH, INC.

Current Principal Place of Business:

2599 NO SWINTON AVE
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

2599 NO SWINTON AVE
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 59-1415463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOONE, FRANK
1110 NE 2ND AVE
DELRAY BEACH, FL 33444 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: D () Delete
Name: SCHULTZ, DEAN,
Address: 152 S E 27TH WAY
City-St-Zip: BOYNTON BCH, FL 00000, 33435

Title: D () Delete
Name: WALKER, MARVIN,
Address: SW 18TH ST
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: LEDBETTER, DAVID,
Address: 760 N W SEVENTH STREET
City-St-Zip: DELRAY BCH, FL 00000, 33444

Title: D () Delete
Name: BOONE, FRANK
Address: 1110 NE 2ND AVE
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PILCHER, RAYMOND,
Address: 4695 SHERWOOD FOREST DR
City-St-Zip: DELRAY BEACH, FL 33445

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: BOONE, FRANK

D

01/07/2009

Electronic Signature of Signing Officer or Director

Date