## 2004 NOT-FOR-PROFIT-CORPORATION ANNUAL REPORT

## FILED Jul 26, 2004 8:00 am Secretary of State

4. Entity Nam	MENT # 714118 BAPTIST CHURCH OF LAK	E WALES, INC.		07-26-2	2004 90011 036 ****61.25
Principal Place of Business 2601 EAST HIGHWAY 60 LAKE WALES, FL 33853		Malling Address 2601 EAST HIGHWAY 60 LAKE WALES, FL 33853		4404996	ani jäji kinc mali kiko mali kial sivilik at jak
2. Principal P	lace of Business	3. Malling Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07012004 Chg-NP	CR2E037 (10/03)
City & State		City & State		4. FEI Number	Applied For
Zip	Country	Zip	Country	59-1308978  5. Certificate of Status Desi	Not Applicable  sed  \$8.75 Additional
	6. Name and Address of Current f	Sociational Amount		7. Name and Address of N	Fee Required
		registered Agent	Name	7. Name and Address of N	ew Registered Agent
WALLACE, LARRY E 3843 SOUTH SCENIC HIGHWAY LAKE WALES, FL 33853			Street Address (P.O. Box Number Is Not Acceptable)		
		City	FL Zip Code		
SIGNATURE	Signature, typed or printed name of registered agent a Filling Fee is \$61.25 ue by September 8, 2004	nd title if applicable. (NOTE: R  9. Election Campa  Trust Fund Cor	• • –	\$5.00 May Be Added to Fees	DATE  Make check payable to Florida Department of State
10.	∵ ₹C×OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALLACE, LARRY E 3843 SOUTH SCENIC HWY LAKE WALES, FL 33853	☐ Delete	TITLE NAME . STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KIMBLER, LUTHER 273 TOWERWOOD LAKE WALES, FL	. Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete Starr Ridge Dr Wales, Fl 33898	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCCOLLOUGH, BOB 5154 VALENCIA STREET LAKE WALES, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME	D .	☐ Defete	TITLE		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP	EDWARDS, RICK 2732 TALL PALM AVENUE LAKE WALES, FL 33853	į	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: AND STORE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DELLA T/19/04 (863) 676-6872