

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 715323

1. Entity Name
LAKECREST COMMUNITY BAPTIST CHURCH, INC.



Principal Place of Business
**4050 LAKE WASHINGTON ROAD
MELBOURNE, FL 32934**

Mailing Address
**4050 LAKE WASHINGTON ROAD
MELBOURNE, FL 32934**



04052006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2288802

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ACEVEDO, JORGE
2014 GARNER AVE
MELBOURNE, FL 32935**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when remaining)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
TAYLOR, DOUG
2985 PEBBLE CREEK ST
MELBOURNE, FL 32935**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
LEDOIN, DON
4655 CAROLWOOD DRIVE
MELBOURNE, FL 32934**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
THOMAS, GARY
3733 THOMAS PLACE
MELBOURNE, FL 32934**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SOBIN, DOUG
2600 SHELLWOOD DR
MELBOURNE, FL 32934**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000515293
04/29/06-80197-014 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-06 321-254-9860

Date

Daytime Phone #