

2000 UNIFORM BUSINESS REPORT (UBR)

4/1

DOCUMENT # 716892

1. Entity Name

COMMUNITY CHURCH OF GOD OF LAKE PLACID, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

04-18-2000 90238 020 ****70.00

Principal Place of Business

Mailing Address

254 EAST PARK AVE
LAKE PLACID FL 33852232 E. PARK AVE
LAKE PLACID FL 33852
US

2. Principal Place of Business

735 Sun Ln Lake Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lake Placid, FL

City & State

Zip 33852

Country USA
Highlands

Zip

Country

4. FEI Number

59-3055708

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALENTINE, DEBRA
232 E. PARK AVE
LAKE PLACID FL 33852Roxanna Hadley
4 Meadowlake Dr.
Lake Placid, FL 33852

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D SPIRES ☒ Delete
 NAME SPIRES, ANDREW
 STREET ADDRESS 192 11TH ST.
 CITY-ST-ZIP LAKE PLACID FL 33852

TITLE CHAIRMAN BD. ELDER ☐ Change ☒ Addition
 NAME NORMAN WELCH
 STREET ADDRESS 11 Richards Dr.
 CITY-ST-ZIP Lake Placid, FL 33852

TITLE D ☒ Delete
 NAME CANNON, CLARICE
 STREET ADDRESS 312 WASHINGTON AVE.
 CITY-ST-ZIP LAKE PLACID FL

TITLE PASTOR ☐ Change ☒ Addition
 NAME JOSEPH L. DEMART
 STREET ADDRESS 1590 Second St.
 CITY-ST-ZIP Lake Placid, FL 33852

TITLE D ☒ Delete
 NAME LONG, KENNETH
 STREET ADDRESS 5 PINE AIRE CIRCLE
 CITY-ST-ZIP LAKE PLACID FL 33852

TITLE Treasurer ☐ Change ☒ Addition
 NAME Roxanna Hadley
 STREET ADDRESS 4 Meadowlake Drive
 CITY-ST-ZIP Lake Placid, FL 33852

TITLE T ☒ Delete
 NAME VALENTINE, DEBRA
 STREET ADDRESS 438 SUNDOWN AVENUE
 CITY-ST-ZIP LAKE PLACID FL 33852

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE S ☐ Delete
 NAME JOHNSON, CAROLYN
 STREET ADDRESS 608 DENISE AVENUE
 CITY-ST-ZIP SEBRING FL 33870

TITLE Secretary ☒ Change ☐ Addition
 NAME CAROLYN KAUFMAN
 STREET ADDRESS 56 PINE AIRE CIRCLE
 CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CORPORATE USE ONLY