

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90492 015 ****61.25

DOCUMENT # 718142

1. Entity Name
LAKESIDE BAPTIST CHURCH OF ORLANDO, INC.



Principal Place of Business
**9635 BEAR LAKE RD
APOPKA FL 32703**

Mailing Address
**9635 BEAR LAKE RD
APOPKA FL 32703**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Seminole

Zip

Country

Seminole

4. FEI Number **59-2426615**

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

**PENNA, HOYLE
5405 PITCH PINE
ORLANDO FL 32811**

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. 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 reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TC** ☐ Delete
NAME **PENNA, HOYLE**
STREET ADDRESS **5405 PITCH PINE**
CITY-ST-ZIP **ORLANDO FL 32811**

TITLE **T** ☐ Change ☒ Addition
NAME **Duncan Hornsby**
STREET ADDRESS **252 Summerset Dr.**
CITY-ST-ZIP **Apopka, FL 32712**

TITLE **T** ☐ Delete
NAME **EDWARDS, THOMAS H**
STREET ADDRESS **116 CUMBERLAND CIRCLE**
CITY-ST-ZIP **LONGWOOD FL 32779**

TITLE **T** ☐ Change ☒ Addition
NAME **Robert weiss**
STREET ADDRESS **114 Essex Dr.**
CITY-ST-ZIP **Longwood, FL 32779**

TITLE **T** ☐ Delete
NAME **BENNETT, GENE**
STREET ADDRESS **2728 AMBROSIA CT**
CITY-ST-ZIP **APOPKA FL 32703**

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

TITLE **T** ☒ Delete
NAME **FERULLO, ALAN**
STREET ADDRESS **1013 JEROME WAY**
CITY-ST-ZIP **APOPKA FL 32703**

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

TITLE **T** ☐ Delete
NAME **DAKEL, ROBERT**
STREET ADDRESS **2938 BERMUDA AVE**
CITY-ST-ZIP **APOPKA FL 32703**

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

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: **Robert Weiss**

1-16-03

407-862-6934

CR2E037 (10/02)