2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004 8:00 am
Secretary of State
04-06-2004 90029 028 ****61.25

DOCUMENT # 721064

1. Entity Name
LAKE FOREST BAPTIST CHURCH, INC.

44025173

Principal Place of Business	Mailing Address
5121 E UNIVERSITY AVE GAINESVILLE, FL 32641 US	5121 E UNIVERSITY AVE GAINESVILLE, FL 32641 US

03062004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1292853 ☐ 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
BROWN, ALUSE 1511 NW 6TH ST GAINESVILLE, FL 32601	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

Filing Fee is $61.25
Due by May 1, 2004

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DC BASSETT, THEODORE R 3045 S E 46TH STREET GAINESVILLE, FL 32641	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCDONALD, PATRICK 202 SE 51ST ST. GAINESVILLE, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D McDONALD, PATRICK 5274 SE 4th AVENUE GAINESVILLE FL 32641	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T POWERS, D 3621 SE 29TH BLVD GAINESVILLE, FL 32641	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T McDONALD, JOYCE 5274 SE 4th AVENUE GAINESVILLE FL 32641	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHANE, POWERS 3621 SE 29TH BLVD GAINESVILLE, FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MANN, DAVID 8401 NW 13th STREET, LOT 132 GAINESVILLE, FL 32653	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WOLFE, NICHOLE 12621 SW 143RD STREET ARCHER, FL 32618	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FOGARTY, DANIELLE 3009 SE HAWTHORNE ROAD GAINESVILLE, FL 32641	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GRIFFIS, S 204 NE 47TH TERR GAINESVILLE, FL 23641	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BASSETT, THEODORE 3045 SE 46th STREET GAINESVILLE, FL 32641	☐ Change ☑ Addition

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: Theodore R Bassett 4/5/04 352-378-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #