

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **723903** (1)  
1. Corporation Name  
**SCOTT LAKE BAPTIST CHURCH, INC.**



Principal Place of Business: 5811 SCOTT LAKE ROAD, LAKELAND FL 33813  
Mailing Address: 5811 SCOTT LAKE ROAD, LAKELAND FL 33813

3. Date Incorporated or Qualified: 07/19/1972  
3a. Date of Last Report: 04/11/1995  
4. FEI Number: 59-1406004  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: HENDERSON, STEPHEN B., 4802 TIERRA ALTA CT., LAKELAND FL 33813

10. Name and Address of New Registered Agent (81-84): Francis Savage, 1417 E. Private Drive, Lakeland, FL 33813

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Francis Savage (with signature) DATE 4/10/96

12. OFFICERS AND DIRECTORS

TITLE	TR	<input type="checkbox"/> DELETE
NAME	BROCK, CAMERON	
STREET ADDRESS	2133 RAINBOWER DR	
CITY-ST-ZIP	LAKELAND FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	SAVAGE, FRANCIS	
STREET ADDRESS	1417 E. PRIVATE DR.	
CITY-ST-ZIP	LAKELAND FL	
TITLE	TR	<input type="checkbox"/> DELETE
NAME	HAZEN, JULIAN	
STREET ADDRESS	3603 DAN-UNIE LANE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	HENDERSON, STEPHEN B	
STREET ADDRESS	4802 TIERRA ALTA CT	
CITY-ST-ZIP	LAKELAND FL	
TITLE	TR	<input type="checkbox"/> DELETE
NAME	RICHARDSON, KEITH	
STREET ADDRESS	1430 CHERRY LN	
CITY-ST-ZIP	LAKELAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	George Addy	
1.3 STREET ADDRESS	1824 Pinnacle Dr.	
1.4 CITY-ST-ZIP	Lakeland, FL 33813	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: George Addy (with signature) George A. Addy, Treasurer 665-0961  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)