2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# 733183

Entity Name: LAKESIDE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

2539 MOODY ROAD
P O BOX 1246
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

2539 MOODY ROAD
P O BOX 1246
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-1631340 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PLANTE, MICHEAL E
938 SANDPIPER LN
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	HALCOMB, MITCHELL W	
Address:	532 SPARROW BRANCH CIR	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:	P	( ) Delete
Name:	KNOLL, J. C.	
Address:	609 GOLDENRON WAY	
City-St-Zip:	SAINT MARYS, GA 31558	
Title:	D	( ) Delete
Name:	MCDONALD, DAVID	
Address:	693 O'HARA RD	
City-St-Zip:	MIDDLEBURG, FL 32068 US	
Title:	S	( ) Delete
Name:	PLANTE, MICHAEL E	
Address:	938 SANDPIPER LANE	
City-St-Zip:	ORANGE PARK, FL 32073	
Title:	D	( ) Delete
Name:	GARNER, RON	
Address:	1493 SCARLETT WAY	
City-St-Zip:	GREEN COVE SPRINGS, FL 32043	
Title:	D	( ) Delete
Name:	CRAWFORD, DARRELL	
Address:	10937 FALKLAND RD.	
City-St-Zip:	JACKSONVILLE, FL 32221 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	T	(X) Change ( ) Addition
Name:	BRUCE, DARREN K	
Address:	1300 LAKEWOOD DR.	
City-St-Zip:	JACKSONVILLE, FL 32259	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARREN K. BRUCE T 04/30/2006

Electronic Signature of Signing Officer or Director — Date