## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with anyaddress, with all other like empowered.

SIGNATURE:

## Apr 02, 2004 8:00 am Secretary of State **DOCUMENT # 739834** 03-22-2004 90056 041 \*\*\*\*61.25 1. Entity Name LAKE ELLEN BAPTIST CHURCH, INC. Mailing Address Principal Place of Business 4495 CRAWFORDVILLE HWY CRAWFORDVILLE FL 32327 66409237 4495 CRAWFORDVILLE HIGHWAY CRAWFORDVILLE FL 32327 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) Applied For 4. FEI Number City & State City & State 59-1767647 Not Applicable \$8.75 Additional Country Country Ziρ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CRUTCHFIELD, ANNA BELLE 26 JACK CRUM RD 49 Emmett Whaley Rd **CRAWFORDVILLE FL 32327** Zip Code City 32327 **Crawfordville** 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 Fulton Jerome Colvin SIGNATURE Signature, typed or printed name of registered agent and little if applicable FILE NOW: FEE IS \$61.2 Due By May 1, 2004 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. Change ☐ Addition TITLE T Detete VALIGHN, ROBERT NAME NAME Vaughn, Bobby A. 235 LONGLEAF DR STREET ADDRESS STREET ADDRESS 235 Longleaf Dr Crawfordville, FL 32327 CRAWFORDVILLE FL 32327 CITY-ST-ZIF CITY-ST-7IP SC Change Addition Dalete TITLE TC TITLE ANDREWS, WILLIA. NAME Hays, Daniel M. NAME 63 FOX RUN CIRCLE STREET ADDRESS 329 Bostic Pelt Rd. STREET ADDRESS CRAWFORDVILLE FL 32327 CITY-ST-ZIP CITY-ST-ZIP Crawfordville, FL 32327 Change Addition X Delete TITLE TILE PHILLIPS, RON NAME Colvin, Fulton Jerome Colvin NAME 137 SHEPARD'S EASEMENT STREET ADDRESS 49 Emmett Whaley Rd. STREET ADDRESS CRAWFORDVILLE FL 32327 CITY - ST - ZIP .... CITY-ST-ZIP Crawfordville: FL-32327 Change ☐ Addition **X** Dalete TITLE TITLE LEE, ROBERT Camp, Ivan Eugene 313 Casora Dr. NAME 109 COUNCIL MOORE RD STREET ADDRESS STREET ADDRESS CRAWFORDVILLE FL 32327 CITY-ST-ZIP C/TY-ST-ZIP Crawfordville, Addition ☐ Change TITLE me Delete PILKINTON, MARCUS NAME NAME 160 SHADOW OAK CIRCLE STREET ADDRESS STREET ADDRESS CRAWFORDVILLE FL 32327 CITY-ST-ZIF CITY, ST. 7P Change Addition ☐ Delete TITLE TITLE Crum, Derrick NAME NAME STREET ADDRESS STREET ADDRESS 208 Country Club Dr. CITY-ST-ZIP CITY-ST-ZIP Crawfordville, FL 32327 12. I hereby certify that the information supplied with this filling 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

SIGNONG OFFICER OR DIRECTOR

FILED

Daniel M. Hays, Chairman Trustees 850-926-5265

03/21/04