

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739834

FILED
Jan 09, 2012
Secretary of State

Entity Name: LAKE ELLEN BAPTIST CHURCH, INC.

Current Principal Place of Business:

4495 CRAWFORDVILLE HIGHWAY
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

4495 CRAWFORDVILLE HWY
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

FEI Number: 59-1767647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUM, DERRICK
90 EMERALD ACRES RD.
CRAWFORDVILLE, FL 32327 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: TC
Name: CRUM, DERRICK
Address: 90 EMERALD ACRES ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: COLVIN, JEROME
Address: 49 EMMETT WHALEY ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: TRAWEEK, JIM
Address: 449 RIVER PLANTATION ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: VAUGHN, BOB
Address: 235 LONG LEAF DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: WALLS, EUGENE
Address: 223 LONNIE RAKER LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: HUGHES, KENNY
Address: 234 BAY PINE DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby 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 all other like empowered.

SIGNATURE: DERRICK CRUM

TC

01/09/2012

Electronic Signature of Signing Officer or Director

Date