

2000 UNIFORM BUSINESS REPORT (UBR)

2/2

FILED
May 15, 2000 8:00 am
Secretary of State

02-29-2000 90143 037 ****61.25

DOCUMENT # 745436

1. Entity Name

LAKE BRANTLEY CHURCH, INC.

Principal Place of Business

2270 SAND LAKE RD.
ALTAMONTE SPGS. FL 32714

Mailing Address

2270 SAND LAKE RD.
ALTAMONTE SPGS. FL 32714-7070

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2247864

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~REID, ROBERT~~
~~1703 WHITE CLOUD AVE~~
~~APOPKA FL 32707~~

EGBERT Roy

7. Name and Address of New Registered Agent

Name **EGBERT "ROY" CHAMBERS**

Street Address (P.O. Box Number is Not Acceptable)
3179 FOXWOOD DR
APOPKA,

City

FL

Zip Code

32703

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

EGBERT "ROY" CHAMBERS, CHAIRPERSON OF THE BOARD 2/9/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **REID, ROB**
STREET ADDRESS **1703 WHITE CLOUD AVE**
CITY-ST-ZIP **APOPKA FL 32712**

TITLE **TD** ☒ Delete
NAME **HOWARD JILL**
STREET ADDRESS **656 VENEER DR**
CITY-ST-ZIP **ALTAMONTE SPRINGS FL 32714**

TITLE **SD** ☐ Delete
NAME **LAMB, LINDA**
STREET ADDRESS **1680 WEST LAKE BRANTLEY RD**
CITY-ST-ZIP **LONGWOOD FL**

TITLE **CD** ☒ Delete
NAME **HERRING JIM**
STREET ADDRESS **4033 GREENFERN, DR**
CITY-ST-ZIP **ORLANDO FL 32810**

TITLE **CD** ☐ Delete
NAME **CHAMBERS, EGBERT "ROY"**
STREET ADDRESS **3179 FOX WOOD DR**
CITY-ST-ZIP **APOPKA FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Change ☒ Addition
NAME **CLARK ADAMS**
STREET ADDRESS **930 N. Union ex.**
CITY-ST-ZIP **DELTONA, FL 32725**
FINANCIAL SECRETARY

TITLE **FS** ☐ Change ☒ Addition
NAME **ENA M. CHAMBERS**
STREET ADDRESS **3179 FOXWOOD DR.**
CITY-ST-ZIP **APOPKA, FL 32703**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **AT** ☐ Change ☒ Addition
NAME **MURRAY, LAMB**
STREET ADDRESS **1680 W. LAKE BRANTLEY RD.**
CITY-ST-ZIP **LONGWOOD, FL 32779**

TITLE **T** ☐ Change ☒ Addition
NAME **ROGER Ritschard**
STREET ADDRESS **3700 CONVENTRY LN**
CITY-ST-ZIP **OCFEE, FL 34761**

TITLE **T** ☐ Change ☒ Addition
NAME **CARL FIEL**
STREET ADDRESS **2700 CONVENTRY LN**
CITY-ST-ZIP **OCFEE, FL 34761**

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 supplement 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EGBERT "ROY" CHAMBERS

Date

Daytime Phone #

2/15/00 (407)682-7330

CR2E037 (9/99)