

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746700

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** LAKE HARBOR COMMUNITY METHODIST CHURCH, INC.

**Current Principal Place of Business:**

29 W. CORKSCREW BLVD  
LAKE HARBOR, FL 33459

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 37  
LAKE HARBOR, FL 33459

**New Mailing Address:**

**FEI Number:** 65-0228618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SCHNEIDER, NORMA R  
800 W. ROYAL PALM AVE.  
CLEWISTON, FL 33440 US

**Name and Address of New Registered Agent:**

HAMMIL, TANYA  
1027 CARIBBEAN AVENUE  
CLEWISTON, FL 33440 US

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: TANYA HAMMIL

04/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HAMMIL, JAMES MR  
Address: 1027 CARRIBBEAN AVE.  
City-St-Zip: CLEWISTON, FL 33440 US

Title: D  
Name: WEEKS, BARNES MR  
Address: 8 E CORKSCREW BLVD.  
City-St-Zip: LAKE HARBOR, FL 33459 US

Title: VP/D  
Name: MIKOVSKY, EDWARD J MR  
Address: 27 E CORKSCREW BLVD.  
City-St-Zip: LAKE HARBOR, FL 33459 US

Title: D  
Name: WILLIAMS, GENE MR  
Address: 40 MUTT THOMAS RD  
City-St-Zip: LAKE HARBOR, FL 33459 US

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: JAMES HAMMIL

P/D

04/06/2012

Electronic Signature of Signing Officer or Director

Date