

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 16, 2008 8:00 am**  
**Secretary of State**

01-16-2008 90049 040 \*\*\*\*61.25



**DOCUMENT # 747515**

1. Entity Name  
**LAKE WORTH CHRISTIAN REFORMED CHURCH, INC.**

Principal Place of Business  
**1325 NORTH "A" STREET  
 LAKE WORTH, FL 33460**

Mailing Address  
**1325 NORTH "A" STREET  
 LAKE WORTH, FL 33460**

2. Principal Place of Business - No P.O. Box #  
 3. Mailing Address



01072008 Chg-NP CR2E037 (12/06)

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number  
**59-0838093**

Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**VONHOF, GARY L., ESQ.  
 1551 FORUM PLACE, BLDG. 100  
 WEST PALM BEACH, FL 33402**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make check payable to  
 Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T NAME STREET ADDRESS CITY-ST-ZIP	<b>ROZENDAL, RETER</b> 6329 STONEHURST CIRCLE LAKE WORTH, FL 33467 <input checked="" type="checkbox"/> Delete	T NAME STREET ADDRESS CITY-ST-ZIP	<b>Aaron De Hoog</b> 622 Springdale Circle Palm Springs, FL 33461 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
P NAME STREET ADDRESS CITY-ST-ZIP	<b>DYKSTRA, TOM</b> 1404 KILGORA LANE LAKE WORTH, FL 33460 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V NAME STREET ADDRESS CITY-ST-ZIP	<b>BOM, DAVID</b> 2337 PALM RD WEST PALM BEACH, FL 33406 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D NAME STREET ADDRESS CITY-ST-ZIP	<b>WIERENGA, PHILLIP</b> 10811 CAMBAY CIRCLE BOYNTON BEACH, FL 33437 <input checked="" type="checkbox"/> Delete	D NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Ron Vanderwey</b> 14 Redwood Court Boynton Beach, FL 33426
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Thomas R. DeHoog* **1/14/08** **561.585.2011**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #