

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749192

FILED  
Jan 06, 2008  
Secretary of State

**Entity Name:** LAWTON ROAD BAPTIST CHURCH OF PENSACOLA, INC.

**Current Principal Place of Business:**

7845 LAWTON RD  
PENSACOLA, FL 325146162

**New Principal Place of Business:**

**Current Mailing Address:**

7845 LAWTON RD  
PENSACOLA, FL 325146162

**New Mailing Address:**

**FEI Number:** 05-0065914

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROCKMAN, CLARENCE  
7845 LOWTON ST  
PENSACOLA, FL 32514 US

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

BROCKMAN, CLARENCE R PASTOR  
7845 LOWTON ST  
PENSACOLA, FL 32514 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: CLARENCE R. BROCKMAN

01/06/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BROCKMAN, CLARENCE R  
Address: 1 FRISCO RD  
City-St-Zip: PENSACOLA, FL

Title: TD ( ) Delete  
Name: FREEMAN, W. D.,  
Address: 2427 BERYL AVE  
City-St-Zip: PENSACOLA, FL

Title: VD ( ) Delete  
Name: FREEMAN, ROBERT E  
Address: 2300 WELIEN  
City-St-Zip: PENSACOLA, FL 32507

Title: T ( ) Delete  
Name: BARNHILL, JOSEPH W  
Address: 3289 MELVIN DRIVE  
City-St-Zip: PACE, FL 32571

Title: T ( ) Delete  
Name: WIGGINS, STEPHEN B  
Address: 10748 COUNTRY OSTRICH DRIVE  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: W. D. FREEMAN

DEAC

01/06/2008

Electronic Signature of Signing Officer or Director

Date