

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90145 032 ****61.25

DOCUMENT # 753138

1. Entity Name

**WESTMINSTER PRESBYTERIAN CHURCH OF LAKE LAND, FLO
RIDA, INC.**



Principal Place of Business
**730 SOUTH FLORIDA AVENUE
LAKE LAND FL 33801
US**

Mailing Address
**730 SOUTH FLORIDA AVENUE
LAKE LAND FL 33801
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0873887**

Applied For
Not Applicable

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

**HILL, LEWIS
821 LAKESIDE COURT
LAKE LAND FL 33815**

Name **Vousden, Edwin**

Street Address (P.O. Box Number is Not Acceptable)

2821 Vousden Lane

City **Lakeland**

FL

Zip Code
33801

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 *Edwin C Vousden*

2/16/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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

TITLE **PT** ☐ Delete
NAME **VOUSDEN, EDWIN**
STREET ADDRESS **2821 VOUSDEN LANE**
CITY-ST-ZIP **LAKE LAND FL 33801**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **Lakeland FL 33801**
CITY-ST-ZIP

TITLE **VPT** ☐ Delete
NAME **HILL, LEWIS**
STREET ADDRESS **821 LAKESIDE CRT**
CITY-ST-ZIP **LAKE LAND FL 33815**

TITLE ☒ Change ☐ Addition
NAME **VPT**
STREET ADDRESS **Duncan, John**
CITY-ST-ZIP **612 Waverly Place
Lakeland FL 33815**

TITLE **ST** ☐ Delete
NAME **NEELY, MARGARET**
STREET ADDRESS **33 IMPERIAL SOUTHGATE VILLAS**
CITY-ST-ZIP **LAKE LAND FL 33803**

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

TITLE **TT** ☐ Delete
NAME **ROBERT, AUDREY**
STREET ADDRESS **P.O. BOX 2736**
CITY-ST-ZIP **LAKE LAND FL 33806**

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

TITLE **FS** ☐ Delete
NAME **BERRY, HELEN**
STREET ADDRESS **811 LAKESIDE AVE**
CITY-ST-ZIP **LAKE LAND FL**

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS **Lakeland FL 33815**
CITY-ST-ZIP

TITLE **AAT** ☐ Delete
NAME **VOUSDEN, EDWIN**
STREET ADDRESS **2821 VOUSDEN LN**
CITY-ST-ZIP **LAKE LAND FL 33801**

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

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 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:

Signature Required

2/16/03

CR2E037 (10/02)