2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State
04-09-2001 90034 017 ****61.25

DOCUMENT # 754013

1. Entity Name

LAKESIDE COMMUNITY CHURCH, INC.

Principal Place of Business	Mailing Address
564 TARA FARMS RD. DOCTOR'S INLET FL 32068	1900 HOWELL BRANCH RD. #5 WINTER PARK FL 32792 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	546 Tara Farms Rd. Suite, Apt. #, etc.
City & State	City & State: Middleburg, FL
Zip / Country	Zip: 32068 / Country: Clay

4. FEI Number: 59-2092739 ☐ 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
WALTER A. ERIKSEN JR. 9624 LK DOUGLAS PLACE ORLANDO FL 32817	Name: Marcus Sohm Street Address (P.O. Box Number is Not Acceptable): 1316 Thrower Road City: Green Cove Springs FL Zip Code: 32043

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: Marcus Sohm — 4/1/2001
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 Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ERIKEN WALTER JR. A. 9624 LK DOUGLAS PLACE ORLANDO FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Robert Clark 1980 Timucua Trail Middleburg, FL 32068	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BISHOP, AL 7041 PINE HOLLOW DR MOUNT DORA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD G. William Burchett 4405-B Poling Blvd Penney Farms, FL 32079	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KAISER, JOHN 3484 VALLEY CREEK DR TALLAHASSEE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Marcus Sohm 1316 Thrower Road Green Cove Springs, FL 32043	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD JOHNSON, CHRIS 2330 W. BERMUDA DR MIRAMAR FL 33023-3633	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T Lori Atkinson 2296 Daisy Middleburg, FL 32068	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMPSON, NEAL 6510 NW PLACE GAINESVILLE FL 32605	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D David Gahring 1500 Quailwood Ct. Orange Park, FL 32073	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: G. William Burchett — 904-529-8180
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #