2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#754013

Feb 25, 2009 Secretary of State

Entity Name: LAKESIDE COMMUNITY CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

564 TARA FARMS RD. DOCTOR'S INLET, FL 32068

Current Mailing Address: New Mailing Address:

546 TARA FARMS RD MIDDLEBURG, FL 32068 US

FEI Number: 59-2092739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BURCHETT, WILLIAM G 4405 POLING BLVD, APT 105-B PENNEY FARMS, FL 32079 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MIKELL, LEE MIKELL, LEE DEACON Name: Name: 2792 GREENRIDGE RD Address: 2792 GREENRIDGE RD Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073

Title: Title: (X) Change () Addition () Delete RUST, PETER A Name: COLEMAN, CAM DEACON Name:

Address: 2503 ELBOW RD. Address: 1322 RUSHING DRIVE City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32065

Title: () Delete Title: (X) Change () Addition HANS, PATRICIA HANS, PATRICIA A Name: Name:

3368 WILDERNESS CIR. 3368 WILDERNESS CIR. Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

() Delete Title: Title: (X) Change () Addition

Name: MATTHEWS, TOM Name: ALBRIGHT, MARK ELDER 2673 PRIMROSE CIR 4524 CHIPMUNK ROAD Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

Title: PD () Delete Title: (X) Change () Addition BOWEN, CRAIG D BOWEN, CRAIG D PASTOR Name: Name: 2156 GIN HOUSE DR. 2156 GIN HOUSE DR. Address: Address:

City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068 Title: () Delete Title: (X) Change () Addition

NEFF. PAUL ELDER MIKELL LEE Name: Name: Address: 2285 MARSH HAWK LN., #14-208 Address: 1790 DARTMOUTH DRIVE ORANGE PARK, FL 32003 MIDDLEBURG, FL 32068 City-St-Zip: 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: CRAIG D. BOWEN PAST 02/25/2009