2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007 8:00 am
Secretary of State
04-04-2007 90178 008 ****61.25

DOCUMENT # 759263

1. Entity Name
ZION HOPE BAPTIST CHURCH OF LAKELAND, INC.

Principal Place of Business	Mailing Address
504 PLATEAU AVENUE LAKELAND, FL 33801	PO BOX 815 LAKELAND, FL 33802

03042007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2131321 ☐ 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
JONES, STANLEY R 640 WALDEN AVENUE BARTOW, FL 33830	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, 2007

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROBERTS, ROBERT V 1611 MONTEREY LANE LAKELAND, FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Stanley Jones 640 Walden Ave Bartow FL 33830	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROYLES, STEVEN 815 FAIRLANE DRIVE LAKELAND, FL 33809	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Robert Roberts 1611 Monterey Lane Lakeland FL 33813	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DERRICK, CONNIE 2131 SMITHFIELD CIRCLE SOUTH LAKELAND, FL 33801	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sally Childs 7717 Nature Trail Lakeland FL 33809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DERRICK, FRANK D 2131 SMITHFIELD CIRCLE SOUTH LAKELAND, FL 33801	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D John McGill 2752 Frazier St. Bartow FL 33830	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, STANLEY 640 WALDEN LANE BARTOW, FL 33830	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Tunia Sikes 1010 N Webster Ave Lakeland FL 33805	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEAHY, TERRY 5666 EL DORADO AVENUE LAKELAND, FL 33809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Terry Leahy 5666 Eldorado Ave Lakeland FL 33809	☐ Change ☒ 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: _____ 4-1-07 863-712-4042
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #