2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#759263

FILED Apr 15, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 504 PLATEAU AVENUE LAKELAND, FL 33801 **Current Mailing Address: New Mailing Address:** PO BOX 815 LAKELAND, FL 33802 FEI Number: 59-2131321 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: JONES, STANLEY R 640 WALDEN AVENUE BARTOW, FL 33830 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition ROBERTS, ROBERT V JONES, STANLEY R Name: Name: 1611 MONTEREY LANE Address: 640 WALDON AVE Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: BARTOW, FL 33830 Title: () Delete Title: (X) Change () Addition ROBERTS, ROBERT Name: SIKES, TONIA Name: Address: 1611 MONTEREY LANE Address: 1611 MONTEREY LANE City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: () Change () Addition CHILDS, SALLY Name: Name: 7717 NATURE TRAIL Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: MCGILL, JOHN Name: Address: 2752 FRAZIER ST. Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: Title: () Delete Title: (X) Change () Addition JONES, STANLEY BRADDY, LEONA Name: Name: 640 WALSON AVE 112 FRANCIS SCOTT KEY RD Address: Address: City-St-Zip: BARTOW, FL 33830 City-St-Zip: BARTOW, FL 33830 Title: () Delete Title: () Change () Addition LEAHY, TERRY Name: Name: Address: 5666 EL DORADO AVENUE Address: LAKELAND, FL 33809 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: STANLEY R. JONES P 04/15/2009