## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 770242** 

FILED Aug 24, 2009 Secretary of State

Entity Name: LAKE SQUARE PRESBYTERIAN CHURCH, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:	
	RNINGSIDE DRIVE G, FL 34788		
Current M	lailing Address:	New Mailing Address:	
	RNINGSIDE DRIVE G, FL 34788		
n accordan	: 59-2364778 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation d I Address of Current Registered Agent		
Name and	Address of Current Registered Agent	Name and Address of New Registered Agent.	
HULSEY, 3 225 INDIA	STEPHEN A DR AN TRAII		
EUSTIS, F			
	named entity submits this statement for t e of Florida.	e purpose of changing its registered office or registered agent, or be	oth,
SIGNATUF			
	Electronic Signature of Registered	Agent Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	TOR
Title: Name: Address: City-St-Zip:	PD () Delete MORRIS, TIM 10200 MORNINGSIDE DR LEESBURG, FL 34788	Title: TR (X) Change ( ) Addition Name: DARROW, PAT Address: 10200 MORNINGSIDE DR City-St-Zip: LEESBURG, FL 34788	
Title: Name: Address: City-St-Zip:	VD ( ) Delete BETHANNE, KOPPLIN 10200 MORNINGSIDE DIR LEESBURG, FL 34788	Title: VD (X) Change ( ) Addition Name: SPARKMAN, KAREN Address: 10200 MORNINGSIDE DIR City-St-Zip: LEESBURG, FL 34788	
Fitle: Name: Address: City-St-Zip:	SD ( ) Delete LONG, BERRY 10200 MORNINGSIDE DR LEESBURG, FL 34788	Title: SD (X) Change ( ) Addition Name: SIMPSON, RANDY Address: 10200 MORNINGSIDE DR City-St-Zip: LEESBURG, FL 34788	
Fitle: Name: Address: City-St-Zip:	TD ( ) Delete O'BRIEN, JEAN 10200 MORNINGSIDE DR LEESBURG, FL 34788	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	D ( ) Delete MILLER, CARYL 10200 MORNINGSIDE DR LEESBURG, FL 34788	Title: D (X) Change ( ) Addition Name: CLARK, FAYE Address: 10200 MORNINGSIDE DR City-St-Zip: LEESBURG, FL 34788	
Title: Name: Address: City-St-Zip:	D ( ) Delete PATTERSON, BRIAN 10200 MORNINGSIDE DR LEESBURG, FL 34788	Title: ( ) Change ( ) Addition Name: Address: 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: PAT DARROW TR 08/24/2009