

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002398

FILED
Jun 22, 2009
Secretary of State

Entity Name: THE FREEDOM CENTER OF LAKELAND, INC.

Current Principal Place of Business:

P O BOX 93522
LAKELAND, FL 338043522

New Principal Place of Business:

635 WEST 5TH STREET
LAKELAND, FL 338054372

Current Mailing Address:

P O BOX 93522
LAKELAND, FL 338043522

New Mailing Address:

FEI Number: 01-0686634 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCBRIDE, DAN A
1400 GRASSLANDS BLVD #84
LAKELAND, FL 33803 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ANDERSON, EMORY
Address: 1036 S FLORIDA AVE
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: BACA, SAM
Address: 3527 ASHLING DR
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: BLACKBURN, M WAYNE
Address: PO BOX 90489
City-St-Zip: LAKELAND, FL 338040489

Title: D () Delete
Name: BRUNSON, LEE
Address: P O BOX 407
City-St-Zip: LAKELAND, FL 338020407

Title: D () Delete
Name: BUSHEY, JOYCE
Address: 5638 BLOOMFIELD BLVD
City-St-Zip: LAKELAND, FL 33810

Title: VP () Delete
Name: ZARLE, MICHAEL
Address: PO BOX 93522
City-St-Zip: LAKELAND, FL 338043522

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCBRIDE, DAN A
Address: PO BOX 90489
City-St-Zip: LAKELAND, FL 338040489

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BRUNSON, LEE
Address: PO BOX 407
City-St-Zip: LAKELAND, FL 338020407

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: RUTHVEN, JOE
Address: PO BOX 2420
City-St-Zip: LAKELAND, FL 33806

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: DAN A. MCBRIDE

PD

06/22/2009

Electronic Signature of Signing Officer or Director

Date