

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005668

FILED  
Apr 29, 2005  
Secretary of State

**Entity Name:** LAKESIDE FELLOWSHIP UNITED METHODIST CHURCH, INC.

**Current Principal Place of Business:**

305 S ORANGE BLVD  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

305 S ORANGE BLVD  
SANFORD, FL 32771

**New Mailing Address:**

**FEI Number:** 59-3743236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIVINGSTON, SCOTT A ESQ.  
130 E. HILLCREST ST.  
ORLANDO, FL 32801 US

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

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: CD ( ) Delete  
Name: MILLER, CLIFFORD  
Address: 5211 BRENTWOOD ST.  
City-St-Zip: SANFORD, FL 32771

Title: VCD ( ) Delete  
Name: MCGHEE, NEIL  
Address: 6813 SYLVAN WOODS DR.  
City-St-Zip: SANFORD, FL 32771

Title: TD ( ) Delete  
Name: KIERNAN, JAMES  
Address: 3209 HERON LAKES DR.  
City-St-Zip: SANFORD, FL 32771

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD (X) Change ( ) Addition  
Name: REDDECLIFF, CURTIS  
Address: 488 STILL FOREST TERRACE  
City-St-Zip: SANFORD, FL 32771

Title: VCD (X) Change ( ) Addition  
Name: MEEK, PAUL  
Address: 398 N. PINE MEADOW DRIVE  
City-St-Zip: DEBARY, FL 32713

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

Title: S ( ) Change (X) Addition  
Name: JOHNSON, BARBARA  
Address: 657 STONEFIELD LOOP  
City-St-Zip: HEATHROW, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CURTIS REDDECLIFF

CD

04/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date