

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005984

FILED
Jun 10, 2009
Secretary of State

Entity Name: LILLY BASS CHURCH OF GOD IN UNITY, INC.

Current Principal Place of Business:

626 MAPLE DRIVE
IMMOKALEE, FL 34142

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2506
IMMOKALEE, FL 34143

New Mailing Address:

FEI Number: 45-0471011 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

SCOTT, REMAR
2520 NW 173RD TERRACE
MIAMI, FL 33056 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: SCOTT, REMAR
Address: 2520 NW 173RD TERRACE
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: HAWKINS, ALEXANDER
Address: 508 SOUTH 8TH STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: D () Delete
Name: HUGHES, CLARA
Address: 1545 LIVE OAK DR
City-St-Zip: FT MYERS, FL 33916

Title: D () Delete
Name: OLIVER, ROSETTA
Address: 1907 LEAD AVE
City-St-Zip: IMMOKALEE, FL 34142

Title: D () Delete
Name: JONES, EUGENE
Address: 401 SE 15TH ST
City-St-Zip: IMMOKALEE, FL 34142

Title: D () Delete
Name: SCOTT, KAMELA
Address: 2520 NW 173RD TERRACE
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: REMAR SCOTT

D

06/10/2009

Electronic Signature of Signing Officer or Director

Date