

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05796

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: LENA VISTA BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

213 FLORIDA DRIVE  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

213 FLORIDA DRIVE  
AUBURNDALE, FL 33823

**New Mailing Address:**

FEI Number: 59-1107102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STRICKLAND, DALE  
116 ARIETTA SHORES  
AUBURNDALE, FL 33823 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: TP ( ) Delete  
Name: STRICKLAND, DALE  
Address: 116 ARIETTA SHORES  
City-St-Zip: AUBURNDALE, FL 33823

Title: S ( ) Delete  
Name: ROUSH, JANICE  
Address: 2810 KIMBERLY LANE  
City-St-Zip: AUBURNDALE, FL 33823

Title: V ( ) Delete  
Name: TEW, RONALD  
Address: 2500 LAKE MYRTLE DRIVE  
City-St-Zip: AUBURNDALE, FL 33823

Title: T ( ) Delete  
Name: ROBERTS, JIM  
Address: 405 ORANGE ST  
City-St-Zip: AUBURNDALE, FL 33823

Title: T ( ) Delete  
Name: HARPER, JAMES  
Address: 609 HOPE ROAD  
City-St-Zip: AUBURNDALE, FL 33823

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

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

Title: S (X) Change ( ) Addition  
Name: MEADOWS, TAMMY  
Address: 2215 HURST RD  
City-St-Zip: AUBURNDALE, FL 33823

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

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

Title: T (X) Change ( ) Addition  
Name: OSBORNE, PAUL  
Address: 608 HOPE ROAD  
City-St-Zip: AUBURNDALE, FL 33823

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: DALE STRICKLAND

TP

01/20/2009

Electronic Signature of Signing Officer or Director

Date