2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2008
Secretary of State

DOCUMENT# N06000004761

Entity Name: LAKE SAUNDERS BAPTIST CHURCH, INC.

Current Principal Place of Business:

1405 BAY ROAD
MOUNT DORA, FL 32757 LA

New Principal Place of Business:

Current Mailing Address:

1405 BAY ROAD
MOUNT DORA, FL 32757 LA

New Mailing Address:

FEI Number: 77-0660897 **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:

HAMILTON, JOSEPH LEON
1405 BAY ROAD
MOUNT DORA, FL 32757 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: DIR ( ) Delete
Name: BROWN, ROBERT G
Address: 1405 BAY ROAD
City-St-Zip: MOUNT DORA, FL 32757 LA

Title: DIR ( ) Delete
Name: HAMILTON, JOSEPH LEON
Address: 1405 BAY ROAD
City-St-Zip: MOUNT DORA, FL 32747 LA

Title: SEC ( ) Delete
Name: HAMILTON, SUE
Address: 1405 BAY ROAD
City-St-Zip: MOUNT DORA, FL 32757 LA

Title: DIR ( ) Delete
Name: ROJAS, OSCAR REV
Address: 1405 BAY ROAD
City-St-Zip: MOUNT DORA, FL 32757 LA

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
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: ROBERT G BROWN DIR 06/30/2008

Electronic Signature of Signing Officer or Director — Date