2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 16, 2004 8:00 am Secretary of State DOCUMENT # N11596 1. Entity Name 04-16-2004 90056 029 ****70.00 CHRIST THE KING EPISCOPAL CHURCH OF LAKELAND. Principal Place of Business Mailing Address 6400 N. SOCRUM LOOP RD LAKELAND FL 33809-4141 6400 N. SOCRUM LOOP RD LAKELAND FL 33809-4141 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-2987716 Not Applicable Zip Country Zip Country \$8.75 Additional X 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent المناج ويوالم مستنصاره والأساس الصحارات GOMER, RICHARD H JR. Street Address (P.O. Box Number is Not Acceptable) 1608 YEOMANS PATH LAKELAND FL 33809 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change ☐ Addition ROGERSON, LAWRENCE Rogerson, Lawrence w. NAME NAME 4923 Rolling Meadow DR. 4923 ROLLING MEADOW DR STREET ADDRESS STREET ADDRESS LAKELAND FL 33810 Lakeland FL 33810-2616 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition GOMER JR, RICHARD H NAME NAME 1608 YEOMANTS PATH STREET ADDRESS STREET ADDRESS LAKELAND FL 33809 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ · Change ★ Addition BAILEY, DOUGLAS -Royal James - B .-NAME NAME 77:05 Catherne Drive 2601 SLEEPY HOLLOW LANE STREET ADDRESS STREET ADDRESS LAKELAND FL 33810 CITY-ST-7IP CITY-ST-ZIP alexand FL 33810 ☐ Change TITLE Delete TITLE X Addition CASPARIUS, GEORGE wells Charles NAME NAME 435 LAZY LAKE DRIVE WEST 7227 Morning Dove Loop EAST STREET ADDRESS STREET ADDRESS LAKELAND FL 33801 CITY-ST-ZIP CITY-ST-7IP AKELAND FL 33809 TITI F Delete Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITÝ-ST-ZIP Delete TITLE Change Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

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changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SIGNATURE: Okumence W.

FILED