

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12844

FILED
Jan 22, 2008
Secretary of State

Entity Name: LAKE IDA CHURCH OF CHRIST, INC.

Current Principal Place of Business:

1300 LAKE IDA RD
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

1300 LAKE IDA RD
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 59-2658606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIVEY, CECIL L
450 RAINBOW SPRINGS TER.
ROYAL PALM BEACH, FL 33411 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: T () Delete
Name: EVANS, JOSEPH
Address: 230 SE 4TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

Title: S () Delete
Name: DORSETT, VINCENT
Address: 1280 W. MAGNOLIA CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: JACKSON, JEROME
Address: 717 S. NORTH STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: JONES, R.C.
Address: 12349 COLONY PRESERVE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: SPIVEY, CECIL L
Address: 450 RAINBOW SPRINGS TERRACE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: P () Delete
Name: HILL, KENNETH
Address: 549 ANGLER DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

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: CECIL L. SPIVEY

VP

01/22/2008

Electronic Signature of Signing Officer or Director

Date