2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19514

FILED Apr 25, 2006 Secretary of State

Entity Name: LAKEVIEW BAPTIST CHURCH, HUDSON, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

LAKEVIEW BAPTIST CHURCH 11010, TAMI TRAIL HUDSON, FL 34669 US

Current Mailing Address: New Mailing Address:

11010 TAMI TRAIL HUDSON, FL 34669 US

FEI Number: 59-2754220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BUCKWALTER, HARRY 11010 TAMI TRAIL HUDSON, FL 34669 US

OFFICERS AND DIRECTORS:

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

Electronic Signature of Registered A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 ATCHINSON, LARRY
 Name:
 ATCHINSON, LARRY V

 Address:
 9203 FOREMAST AVE. APT#4411
 Address:
 9203 FOREMAST AVE. APT#4411

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:
 PORT RICHEY, FL 34668

Title: T () Delete Title: T (X) Change () Addition Name: MILASHOUSKAS, THOMAS TO Address: 7721 ILEX DR. Address: 7721 ILEX DR.

Address. 7/21 ILEX DR. Address. 7/21 ILEX DR. City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip: PORT RICHEY, FL 34668

Title: T () Delete Title: T (X) Change () Addition Name: MARTIN, ART Name: CASON, MILLIE S

 Address:
 13905 HUDSON AVE.
 Address:
 13035 FIREFLY LN.

 City-St-Zip:
 HUDSON, FL 34669
 City-St-Zip:
 HUDSON, FL 34669

Title: T (X) Delete Title: () Change () Addition

 Name:
 TUGGLE, STANLEY
 Name:

 Address:
 9321 OTTAWA STREET
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS MILASHOUSKAS TC 04/25/2006