## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 07, 2007 8:00 am Secretary of State

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DOCUMENT # N21001  1. Entity Name CORNERSTONE BAPTIST CHURCH OF LAKELAND, FLORIDA, INC.								02-07-20	07 90033		
6725 GREEN ROAD		672	Mailing Address 6725 GREEN ROAD LAKELAND, FL 33810 US				40010283				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.				01082007	Chg-NP	CR2E	E037 (12/06	)
City & State		City & State					E0 0000044			Applied For Not Applicable	
Zip	Country	Zi	р	Cou	intry		5. Certificate	of Status Desire	d 🛛	\$8.75 / Fee Requ	
	6. Name and Address of Current	Register	ed Agent				7. Name and	Address of Ne	w Registere	d Agent	
SHULTZ, FARRELL 6725 GREEN ROAD LAKELAND, FL 33810				Name Street Address			(P.O. Box Number is Not Acceptable)				
	-,				City		<u> </u>			•∎ I Zip C	odo
					City				F	L Zip C	oae
	named entity submits this statement for	or the purp	ose of changing its	register	ed office or rec	nietoror	d agent or bet	h in the Ctate o	(Clasida La	en formilias mi	th and accept
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_	tions of registered agent.		* *	·		gisterec	а адепт, от вог	ar, in the state o	i rionga. Ta	girraminar wi	п, апи ассерс
SIGNATURE .	signature, typed or printed name of registered agent	t and title if ap			d Agent signature re			n, in the state o	DAT		in, and accept
_		t and title if ap		:: Registere	d Agent signature re	required wh		e	DAT		ı to
_	Signature, typed or printed name of registered agent	_	plicable. (NOTE  9. Election Carr  Trust Fund C	:: Registere	d Agent signature re	required wi	\$5.00 May B	e	DAT Make chi Florida Dep	eck payable partment of	s to State
SIGNATURE .	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2007	_	plicable. (NOTE  9. Election Carr  Trust Fund C	E: Registere  Inpaign F  Contribut  11.  TITLI  NAM  STRE	d Agent signature re Financing ion.	required wi	\$5.00 May B	e	DAT Make chi Florida Dep	eck payable partment of	s to State
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: FARELL E Shultz TR / TReus Rek 0/-2/-07 (863) 853-495 (

CITY-ST-ZIP