2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # N21001

1. Entity Name
CORNERSTONE BAPTIST CHURCH OF LAKELAND, FLORIDA, INC.

Principal Place of Business	Mailing Address
6725 GREEN ROAD LAKELAND, FL 33810 US	6725 GREEN ROAD LAKELAND, FL 33810 US

01302008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2630611

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SHULTZ, FARRELL
6725 GREEN ROAD
LAKELAND, FL 33810

DO NOT WRITE IN THIS SPACE

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CONBOY, TIMOTHY
STREET ADDRESS	8624 HARRISON ROAD
CITY-ST-ZIP	LAKELAND, FL 33810
TITLE	TD
NAME	SHULTZ, FARRELL
STREET ADDRESS	4311 E. KNIGHTS GRIFFIN RD.
CITY-ST-ZIP	PLANT CITY, FL 33565
TITLE	SD
NAME	KEYES, JEANNIE
STREET ADDRESS	2132 LONGLEAF CIRCLE
CITY-ST-ZIP	LAKELAND, FL 33810
TITLE	ST
NAME	WOOLSEY, DOUGLAS
STREET ADDRESS	7910 INDIAN HGTS. DR.
CITY-ST-ZIP	LAKELAND, FL 33810
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000841768
03/11/08-80001-009 70.00

DO NOT WRITE IN THIS SPACE

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.

Farrell E. Shultz

SIGNATURE: Farrell E. Shultz, Jr. Treasurer 02-24-08 (863)853-4956
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #