

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

FILED
Aug 10, 2004 8:00 am
Secretary of State

08-10-2004 90004 046 ****61.25

DOCUMENT # N26539

1. Entity Name

TENTH STREET CHURCH OF GOD OF LAKELAND, INC.



Principal Place of Business

801 WEST TENTH STREET
LAKELAND FL 33805-3601

Mailing Address

801 WEST TENTH STREET
LAKELAND FL 33805-3601

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2907750

Applied For

Not Applicable

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



MOORE

CR2E037 (4/04)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWEAT, WILLIAM A. JR.
2018 SOUTH FLORIDA AVENUE
LAKELAND FL 33803

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE EDC ☐ Delete
NAME MCCLLOUD, ABRAHAM
STREET ADDRESS 4025 TIMBERLAKE RD W
CITY-ST-ZIP LAKELAND FL 33805

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DM ☐ Delete
NAME HICKS, FRANCES
STREET ADDRESS 612 W PARK ST
CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DM ☐ Delete
NAME WASHINGTON, BENNIE
STREET ADDRESS 921 W 13TH ST
CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DT ☐ Delete
NAME BATTLE, QUEEN
STREET ADDRESS 1643 NORMAN DR
CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DM ☐ Delete
NAME WADE, SAVA
STREET ADDRESS 7532 WILLOW WAY W
CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME WRIGHT, ARLEEN
STREET ADDRESS 1025 SO. OHIO AVE
CITY-ST-ZIP LAKELAND FL 33803

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Queen V. Battle

Queen V. Battle

8-6-04 863-689-4904

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #