2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 01, 2006 8:00 am Secretary of State

☐ Change

☐ Addition

ANNUAL REPORT

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # N29540 02-01-2006 90012 050 ****61.25 THE AMERICAN BAPTIST CHURCH OF LAKELAND, INC. Principal Place of Business Mailing Address 1500 W DAUGHTERY RD 1500 W DAUGHTERY RD 60009725 LAKELAND, FL 33810 US LAKELAND, FL 33810 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01202006 Chg-NP CR2E037 (11/05) City & State 4. FEI Number 59-2856559 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MILLER, ROBERT T. 100 EAST LEMON STREET Street Address (P.O. Box Number is Not Acceptable) PO BOX 8169 LAKELAND, FL 33802-8169 Zip Code City 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 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Change ☐ Addition MARTHA NELL REIF LOOSE, WILFORD NAME NAME STREET ADDRESS 173 JEFF ST STREET ADDRESS 1579 LUNGBOW DR. CITY-ST-ZIP LAKELAND, FL 33815 CITY-ST-ZIP LAKELAND, FL 33810 Delete TITLE TITLE Change ☐ Addition DOROTHY SLIFER REIF, MARTHA N NAME NAME STREET ADDRESS 4444 US 98 N #437 STREET ADDRESS LAKELAND FL 33810 CITY-ST-7IP LAKELAND, FL 33809 CITY-ST-ZIP Delete ☐ Addition 🔀 Change TITLE TITLE CLAUDE WHITE NAME MCCASLIN, RUSSELL NAME 1847 MASTERS LANE 415 MARTIN DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33809 CITY-ST-ZIP LAKELAND, FL 33810 Delete TIT) F TITLE 🔀 Change ☐ Addition PHYLLIS A. WOOD WOOD, JOHN R NAME NAME 1610 REYNOLDS RD. #32 1610 REYNOLDS ROAD #32 STREET ADDRESS STREET ADDRESS LAKELAND, FL 33801 LAKELAND, FL 33801 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE: Phyllip a Wood	PHYLLIS A. WOOD	1/22/06	863665-3364
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF SIGN OR DIRECTOR		/ Date /	Daytime Phone #