

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90237 021 ****61.25

DOCUMENT # N93000001941

1. Entity Name
WEST LAKELAND CHURCH OF CHRIST, INC.



Principal Place of Business
5620 OLD HWY 37
LAKELAND FL 33811
US

Mailing Address
PO BOX 964
LAKELAND FL 33802
US

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 59-3181085

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PATTERSON, HENRY. A
1253 GROVELAND LANE
LAKELAND FL 33811

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

9. Election Campaign Financing ☐ **\$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	PD	<input type="checkbox"/> Delete
NAME	PATTERSON, HENRY A	
STREET ADDRESS	1253 GROVELAND LN	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	S.	<input type="checkbox"/> Delete
NAME	PATTERSON, ROSIE L	
STREET ADDRESS	1253 GROVELAND LANE	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GILBERT, PAUL	
STREET ADDRESS	1511 HARTSELL AVE	
CITY-ST-ZIP	LAKELAND FL 33805	
TITLE	D	<input type="checkbox"/> Delete
NAME	WESLEY, GRABLE	
STREET ADDRESS	1045 N VERMONT AVE	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE	D	<input type="checkbox"/> Delete
NAME	JERRY JONES	
STREET ADDRESS	1105 Lake Miriam Drive	
CITY-ST-ZIP	Lakeland, FL 33813	
TITLE	D	<input type="checkbox"/> Delete
NAME	J.C. HAYES	
STREET ADDRESS	408 W. Parker Place	
CITY-ST-ZIP	Lakeland, FL 33805	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVE BLAKENEY	
STREET ADDRESS	140 Glendale St. # 247	
CITY-ST-ZIP	Lakeland, FL 33803	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Henry A. Patterson* **1-10-03** **(863) 761-2598**

CR2E037 (10/02)