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FILED

Feb 14 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS**DOCUMENT # N94000001925 (6)**

1. Corporation Name

**EAST LUMSDEN BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

**4020 E LUMSDEN  
VALRICO FL 33594****4020 E LUMSDEN  
VALRICO FL 33594**

3. Date Incorporated or Qualified

**04/15/1994**

3a. Date of Last Report

**02/16/1996**

2. Principal Place of Business

2a. Mailing Address

**21****26**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22****27**

City &amp; State

City &amp; State

**23****28**

Zip

Country

Zip

Country

**24****25****29****30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**81** Name**82** Street Address (P.O. Box Number is Not Acceptable)**83****84** City**FL****85**

Zip Code

**PEAVYHOUSE, RUSSELL K  
10002 PRINCESS PALM AVE  
SUITE 228  
TAMPA FL 33619**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	RAWLINSON, STUART	
STREET ADDRESS	2237 LAUREL OAK DR.	
CITY-ST-ZIP	VALRICO FL 33594	

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	TOM BOYETTE	
1.3 STREET ADDRESS	101 SHAREWOOD DRIVE	
1.4 CITY-ST-ZIP	VALRICO, FL. 33594	

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	BOYETTE, TOM	
STREET ADDRESS	101 SHAREWOOD DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	

2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Robbie Meeks	
2.3 STREET ADDRESS	3815 Rolling Circle	
2.4 CITY-ST-ZIP	Valrico, FL 33594	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	PEAVYHOUSE, RUSSELL K	
STREET ADDRESS	1515 SEFFNER VALRICO RD.	
CITY-ST-ZIP	SEFFNER FL 33584	

3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Sandra Hartman	
3.3 STREET ADDRESS	710 Hyssop Place	
3.4 CITY-ST-ZIP	Brandon, FL 33510	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

4.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Geraldine Boyette	
4.3 STREET ADDRESS	101 Sharewood Drive	
4.4 CITY-ST-ZIP	Valrico, FL. 33594	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Cherlene Boyette*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/97

Daytime Phone # 0078134

CR2E037 (9/96)