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FILED

Feb 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000002226 (8)

1. Corporation Name

COMMUNITY BAPTIST CHURCH OF LAKE WALES, INC.



Principal Place of Business

Mailing Address

VILLAGE GREEN CHAPEL  
BOX 8716  
FEDHAVEN FL 33854  
USP.O. BOX 8716  
FEDHAVEN FL 33854-8716  
US3. Date Incorporated or Qualified  
05/04/19943a. Date of Last Report  
02/12/1996

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

4. FEI Number

65-0536857

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROGERS, PAUL E  
605 FEDHAVEN DRIVE  
FEDHAVEN FL 33854

81 Name

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

83

84 City

FL

85 Zip Code

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. (Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT ☐ DELETENAME ROGERS, PAUL E.  
STREET ADDRESS 605 FEDHAVEN DRIVE  
CITY-ST-ZIP FEDHAVEN FLTITLE S ☒ DELETENAME ELLEN, INEZ  
STREET ADDRESS 578 FEDHAVEN DRIVE  
CITY-ST-ZIP FEDHAVEN FLTITLE T ☐ DELETENAME RACICOT, PAUL  
STREET ADDRESS 541 FEDHAVEN DRIVE  
CITY-ST-ZIP FEDHAVEN FLTITLE T ☒ DELETENAME LONGANECKER, CLAY  
STREET ADDRESS 3630 MAMMOTH DROVE ROAD  
CITY-ST-ZIP LAKE WALES FLTITLE T ☒ DELETENAME LONGANECKER, BERNICE  
STREET ADDRESS 3630 MAMMOTH DROVE ROAD  
CITY-ST-ZIP LAKE WALES FLTITLE T ☐ DELETENAME RICHARDSON, RUTH  
STREET ADDRESS 561 FEDHAVEN DRIVE  
CITY-ST-ZIP FEDHAVEN FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P, T, Ty

☒ Change☐ Addition

D, Ty

☐ Change☒ AdditionROGERS, SANDRA L.  
605 FEDHAVEN DRIVE  
FEDHAVEN, FL 33854

Ty

☒ Change☐ Addition

D, Ty

☐ Change☒ AdditionRICHARDSON, VARNUM  
561 FEDHAVEN DRIVE  
FEDHAVEN, FL 33854

S, Ty

☒ Change☐ Addition

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: PAUL E. Rogers, Paul E. Rogers 1-25-97 941-696-4371

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0054962

CR2E037 (9/96)