

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90399 014 ****61.25

DOCUMENT # N94000002576

1. Entity Name

LEBANON BAPTIST CHURCH, INC.



Principal Place of Business

6103 280TH STREET
BRANFORD FL 32008
US

Mailing Address

P.O. BOX 116
BRANFORD FL 32008
US



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2107924

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ADERHOLT, HAROLD E
29276 U S 129
BRANFORD FL 32008

7. Name and Address of New Registered Agent

Name

Jerry Brown

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

11480 NE 2nd, Ct

Branford, Fl. 32008

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

Jerry Brown

Jerry Brown

3-21-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

T ☒ Delete
NAME ADERHOLT, HAROLD E
STREET ADDRESS 29276 U S 129
CITY-ST-ZIP BRANFORD FL 32008

T ☐ Delete
NAME BOSTON, JOSEPH
STREET ADDRESS 20435 CTY RD 137
CITY-ST-ZIP LAKE CITY FL 32024

D ☐ Delete
NAME HYGEMA, GUY
STREET ADDRESS 6102 208TH ST
CITY-ST-ZIP BRANFORD FL 32008

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☒ Change ☐ Addition
NAME Jerry Brown
STREET ADDRESS 11480 NE 2nd, Ct.
CITY-ST-ZIP Branford, Fl. 32008

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

SIGNATURE:

Guy Hygema

Guy Hygema 3-21-06 386-935-2658

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #