

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000001198

FILED
May 25, 2002 8:00 AM
Secretary of State

Entity Name: LAKESIDE PRESBYTERIAN CHURCH U.S.A., INC.

Current Principal Place of Business:

505 EAST LAKE RD N
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

505 EAST LAKE RD N
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 59-3306197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, PEYTON
505 EAST LAKE RD N
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KOCH, JAMES
Address: 3226 CRESCENT OAKS BLVD.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: SD () Delete
Name: MCBEE, ROBERT
Address: 3167 EDGEMOORE DR.
City-St-Zip: PALM HARBOR, FL 34685

Title: TD () Delete
Name: BOIS, HOMER
Address: 1243 MARAVISTA DR
City-St-Zip: NEW PORT RICHEY, FL

Title: DVP () Delete
Name: STEWART, CHARLES
Address: 4051 EAGLE COVE DR EAST
City-St-Zip: PALM HARBOR, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GATES, DOUGLAS
Address: 3973 MIMOSA PLACE
City-St-Zip: PALM HARBOR, FL 34685

Title: SD (X) Change () Addition
Name: HAYNES, JEAN
Address: 3884 NOTTINGHAM DR.
City-St-Zip: TARPON SPRINGS, FL 34688

Title: TD (X) Change () Addition
Name: WADDLE, THOMAS
Address: 7246 HUMMINGBIRD LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: DVP (X) Change () Addition
Name: STEWART, CINDY
Address: 4526 SERENITY TRAIL
City-St-Zip: PALM HARBOR, FL 34685

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS L. GATES

PD

05/25/2002

Electronic Signature of Signing Officer or Director

Date