


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N95000001263 1. Entity Name RIVERSIDE BAPTIST CHURCH OF LAFAYETTE COUNTY, INC.	
---	---

Principal Place of Business CR 251 MAYO, FL 32066	Mailing Address 2402 NW CR 251 MAYO, FL 32066
---	---

DO NOT WRITE IN THIS SPACE



01092007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2345843	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LYONS, RICKY 2402 NW CR 251 MAYO, FL 32066

DO NOT WRITE
IN THIS SPACE

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: _____ (NOTE: Registered Agent signature required when reappointing) DATE: _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BUCHANAN, FRANKLIN G 973 NW MERIDIAN RD MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LYONS, ROLAND 2687 NW CR 251 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STARLING, GUY 2871 NW CR 251 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LYONS, RICKY PO BOX 88 N/A MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LYONS, DALE 851 NW CR 292 MAYO, FL 32066
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LAMB, BILL 583 N FLETCHER AVE MAYO, FL 32066

DO NOT WRITE
IN THIS SPACE

U00000593221
01/22/07-80023-023 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 817, 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: *[Signature]* **1/13/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #