

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005810

FILED  
Jan 16, 2007  
Secretary of State

Entity Name: LEE FIRST BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

COUNTY ROAD 255 N  
LEE, FL 32059

**New Principal Place of Business:**

8157 E US HWY 90  
LEE, FL 32059

**Current Mailing Address:**

8157 E US HWY 90  
LEE, FL 32059 US

**New Mailing Address:**

FEI Number: 59-2368706      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KINSEY, SIMON A JR  
414 NE COUNTY RD 255  
LEE, FL 32059 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: D ( ) Delete  
Name: KINSEY, SIMON A JR  
Address: 414 NE COUNTY RD 255  
City-St-Zip: LEE, FL 32059

Title: D ( ) Delete  
Name: MOORE, TOM  
Address: 1878 SE COUNTY RD 255  
City-St-Zip: LEE, FL 32059

Title: VP ( ) Delete  
Name: MILLER, JOEY  
Address: 1388 SE COUNTY RD 255  
City-St-Zip: LEE, FL 32059

Title: P ( ) Delete  
Name: RYE, JAMES  
Address: 9481 SW COUNTY RD 143  
City-St-Zip: JASPER, FL 32052

Title: D ( ) Delete  
Name: KUHFELDT, BOB  
Address: 289 SE CANDLESTICK TRAIL  
City-St-Zip: LEE, FL 32059

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BARRS, EDGAR  
Address: P O BOX 194  
City-St-Zip: LEE, FL 32059

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SEAN ALDERMAN

TREA

01/16/2007

Electronic Signature of Signing Officer or Director

Date