## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000002027

Apr 15, 2009 Secretary of State

Entity Name: LAKE HILL SOUTHERN BAPTIST CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** KEYSTONE HEIGHTS, FL 32656 **Current Mailing Address: New Mailing Address:** P O BOX 602 KEYSTONE HEIGHTS, FL 32656 FEI Number: 59-1957060 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRADLEY, BARBARA B BRADLEY, BARBARA B 7412 CR 3115 7412 CR 315 KEYSTONE HEIGHTS, FL 32656 US KEYSTONE HEIGHTS, FL 32656 US 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: BARBARA B. BRADLEY 04/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TRP () Delete () Change () Addition BRUNT, FRANK Name: Name: 6789 DOE TRAIL Address: Address: City-St-Zip: KEYSTONE HEIGHTS, FL 32656 City-St-Zip: Title: TRP ( ) Delete Title: TRP (X) Change ( ) Addition MYER, MIKE Name: MYER, MIKE Name: Address: 7558 ALAMEDA WAY Address: 5815 YELLOWSTONE ST City-St-Zip: KEYSTONE HEIGHTS, FL 32656 City-St-Zip: KEYSTONE HEIGHTS, FL 32656 Title: TRP () Delete Title: () Change () Addition FRANK, CHRISTIAN Name: Name: Address: 133 MARGIE LANE Address: City-St-Zip: MELROSE, FL 32666 City-St-Zip: Title: ( ) Delete Title: () Change () Addition BRADLEY, BARBARA B Name: Name: Address: 7412 CR 315 Address: City-St-Zip: KEYSTONE HEIGHTS, FL 32656 City-St-Zip:

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: BARBARA B. BRADLEY S 04/15/2009