## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000002313

FILED Feb 05, 2009 Secretary of State

Entity Name: LAKESIDE FELLOWSHIP BAPTIST CHURCH, INC.

	rincipal Place of Business:	New Principal Place of Business:
8000 66TH VERO BE	H AVE ACH, FL 32967	
Current N	lailing Address:	New Mailing Address:
PO BOX 7 SEBASTIA	780703 AN, FL 32978	8000 66TH AVE VERO BEACH, FL 32967
FEI Number	:: 65-0850754 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
3825 15TH MICCO, F The above		purpose of changing its registered office or registered agent, or bo
SIGNATU		
01011/110	Electronic Signature of Registered Ag	ent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT
Title: Name: Address: City-St-Zip:	P ( ) Delete ALDERTON, TERRY 3825 15TH ST MICCO, FL 32976	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address:	VP ( ) Delete ROMER, GLENN 250 ZANE AVE SEBASTIAN, FL 32958	Title: ( ) Change ( ) Addition Name: Address:
City-St-Zip:	SEBASTIAN, FL 32936	City-St-Zip:
Title: Name: Address:	D ( ) Delete BROWN, DALE 584 JOYHAVEN DR SEBASTIAN, FL 32958	City-St-Zip:  Title: D (X) Change ( ) Addition Name: PENDLETON, TOM Address: 73 JOY HAVEN City-St-Zip: SEBASTIAN, FL 32958
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	D ( ) Delete BROWN, DALE 584 JOYHAVEN DR	Title: D (X) Change ( ) Addition Name: PENDLETON, TOM Address: 73 JOY HAVEN
Title: Name: Address: City-St-Zip: Title: Name: Address:	D ( ) Delete BROWN, DALE 584 JOYHAVEN DR SEBASTIAN, FL 32958 TD ( ) Delete MIDDLETON, BILL 116 KARRIGAN ST.	Title: D (X) Change ( ) Addition Name: PENDLETON, TOM Address: 73 JOY HAVEN City-St-Zip: SEBASTIAN, FL 32958  Title: ( ) Change ( ) Addition Name: Address:

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: TERRY ALDERTON P 02/05/2009