## 2005 NOT-FOR-PROFIT CORPORATION

SIGNATURE:

## **FILED ANNUAL REPORT** Mar 05, 2005 08:00 AM **DOCUMENT # N98000003712 Secretary of State** LEHIGH COMMUNITY BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 908 GREENWOOD AVENUE 908 GREENWOOD AVENUE LEHIGH ACRES, FL 33972 LEHIGH ACRES, FL 33972 CR2E037 (10/03) 01192005 No Chg-NP DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0808424 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON, GARTRELL SR. DO NOT WRITE **603 SCOTT AVENUE** LEHIGH ACRES, FL 33972 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** Signature, typed or printed pame of registered agent and title it equitable. (NOTE: Registered Agent signature required when rematating) DATE 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Due by May 1, 2005 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME CANADY, CHARLES REV. STREET ADDRESS 908 GREENWOOD AVENUE CITY-ST-ZIP LEHIGH ACRES, FL 33972 TITLE U00000252577 03/05/05-80035-006 61.25 NAME JOHNSON, GARTRELL, SR. STREET ADDRESS **603 SCOTT AVENUE** CITY-ST-ZIP LEHIGH ACRES, FL 33972 TITLE NAME PONITER, GREGORY STREET ADDRESS **607 SCOTT AVENUE** DO NOT WRITE CITY-ST-ZIP LEHIGH ACRES, FL 33972 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.