2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001720

Entity Name: GATEWAY BAPTIST CHURCH OF LAKE CITY, INC.

FILED Mar 17, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ROUTE 15, BOX 3953 3252 SW STATE ROAD 247 COUNTY ROAD 242 LAKE CITY, FL 32024 LAKE CITY, FL 32024

New Mailing Address: Current Mailing Address:

ROUTE 15, BOX 3953 3252 SW STATE ROAD 247 LAKE CITY, FL 32024 LAKE CITY, FL 32024

FEI Number: 59-3571662 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:

RICHARD MCCALL, CHARLES RICHARD MCCALL, CHARLES RT. 12, BOX 942 508 SW ANGELA TÉRRACE LAKE CITY, FL 32025 LAKE CITY, FL 32024

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: CHARLES R. MCCALL 03/17/2004

> Electronic Signature of Registered Agent Date

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

() Change () Addition () Delete

PETERSON, LLOYD E JR Name: Name: Address: **ROUTE 12, BOX 736** Address: City-St-Zip: LAKE CITY, FL 32025 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: KIRBY, FLETCHER Name: Address: 263 N.W. MISSION RIDGE COURT Address: City-St-Zip: LAKE CITY, FL 32055 City-St-Zip:

Title: () Delete Title: () Change () Addition

BULLARD, CHRIS A Name: Name: 212 N. MARION STREET Address: Address: City-St-Zip: LAKE CITY, FL 32055 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHRIS A. BULLARD PT 03/17/2004