

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705027

Entity Name: LAKE MORTON COMMUNITY CHURCH, INC.**Current Principal Place of Business:**169 LAKE MORTON DR.
LAKELAND, FL 33801**Current Mailing Address:**P.O. BOX 1784
LAKELAND, FL 33802 US**FEI Number:** 59-2291101**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHELBY, GLENN T
1919 VISTA VIEW DR.
LAKELAND, FL 33813 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, C
Name WILSON, DOUG
Address 766 SAGEWOOD DR.
City-State-Zip: LAKELAND FL 33813

Title D
Name LILLY, HENRY
Address 6540 LUNN RD.
City-State-Zip: LAKELAND FL 33811

Title D
Name SHELBY, GLENN
Address 1919 VISTA VIEW DR.
City-State-Zip: LAKELAND FL 33813

Title D
Name STRAUBEL, CHAD
Address 3301 SUMMIT LANE
City-State-Zip: LAKELAND FL 33805

Title D
Name GRUBB, JASON
Address 1803 S. LINCOLN AVE.
City-State-Zip: LAKELAND FL 33803

Title D
Name GARNSEY, KEN
Address 1038 CLEMATIS AVE.
City-State-Zip: LAKELAND FL 33803

Title D
Name MAFFETT, MARK
Address 2346 MILES CT.
City-State-Zip: LAKELAND FL 33812

Title D
Name MATTHEWS, ED
Address 6920 SHIMMERING DR.
City-State-Zip: LAKELAND FL 33813

I hereby 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 all other like empowered.

SIGNATURE: GLENN T. SHELBY**DIRECTOR****03/31/2014**

Electronic Signature of Signing Officer/Director Detail

Date