

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730578

Entity Name: LIFEPOINT CHURCH CRESTVIEW, OF THE ASSEMBLIES OF GOD, INC.**FILED**
Feb 05, 2015
Secretary of State
CC8321135805**Current Principal Place of Business:**400 S FERDON BLVD.
CRESTVIEW, FL 32536**Current Mailing Address:**400 S FERDON BLVD.
CRESTVIEW, FL 32536**FEI Number: 58-1025970****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LIFEPOINT CHURCH
400 S. FERDON BLVD.
CRESTVIEW, FL 32536 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 S
Name KAPOTSY, MICHAEL
Address 6475 MOONLIGHT LANE
City-State-Zip: CRESTVIEW FL 32539

Title PASTOR
Name ENGLISH, MARK A
Address 6495 BURLESON DR
City-State-Zip: CRESTVIEW FL 32539

Title DEACON
Name FOWLER, STEVEN
Address 5921 OLD BETHEL RD
City-State-Zip: CRESTVIEW FL 32536

Title DEACON
Name CAMPBELL, BRIAN
Address 207 SOUTHGATE DR
City-State-Zip: CRESTVIEW FL 32536

Title T
Name BARROW, KATHLYN S
Address 513 KREST DRIVE
City-State-Zip: CRESTVIEW FL 32536

Title D
Name SMITH, MICHAEL
Address 4754 CONNER DR.
City-State-Zip: CRESTVIEW FL 32539

Title DEACON
Name CRAWFORD, CHRISTOPHER
Address 207 CABANA WAY
City-State-Zip: CRESTVIEW FL 32536

Title DEACON
Name THOMPSON, JOHN
Address 5861 DEERMONT DR
City-State-Zip: CRESTVIEW FL 32539

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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: KATHLYN S BARROW**TREASURER****02/05/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DEACON
Name	KIMBROUGH, BEN
Address	6117 BURBANK CT
City-State-Zip:	CRESTVIEW FL 32536