

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754013

Entity Name: LAKESIDE COMMUNITY CHURCH, INC.**Current Principal Place of Business:**

564 TARA FARMS RD.

DOCTOR'S INLET, FL 32068

Current Mailing Address:

546 TARA FARMS RD

MIDDLEBURG, FL 32068 US

FEI Number: 59-2092739**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

BURCHETT, WILLIAM G

4405 POLING BLVD,

APT 105-B

PENNEY FARMS, FL 32079 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 DEACON, TREASURER
Name COLEMAN, STUART C
Address 1322 RUSHING DRIVE
City-State-Zip: ORANGE PARK FL 32065

Title SECRETARY
Name HANS, PATRICIA A
Address 3368 WILDERNESS CIR.
City-State-Zip: MIDDLEBURG FL 32068

Title ELDER
Name ALBRIGHT, MARK W
Address 4524 CHIPMUNK ROAD
City-State-Zip: MIDDLEBURG FL 32068

Title PASTOR, ELDER
Name BOWEN, CRAIG D
Address 2156 GIN HOUSE DR.
City-State-Zip: MIDDLEBURG FL 32068

Title DEACON
Name ZETTEK, PAUL E
Address 1878 SHERWOOD DRIVE
City-State-Zip: MIDDLEBURG FL 32068

Title DEACON
Name NOLAN, TIM M
Address 421 AQUARIUS CONCOURSE
City-State-Zip: ORANGE PARK FL 32073

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: CRAIG D. BOWEN

PASTOR

02/20/2013

Electronic Signature of Signing Officer/Director Detail

Date