

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32412

Entity Name: LAKE AREA MINISTRIES, INC.**Current Principal Place of Business:**131 COMMERCIAL CIRCLE
KEYSTONE HEIGHTS, FL 32656**Current Mailing Address:**P.O. BOX 1385
KEYSTONE HEIGHTS, FL 32656 US**FEI Number:** 59-2972913**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DENNIS, TANYA M.
3991 SE STATE ROAD 21
KEYSTONE HEIGHTS, FL 32656 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:** TANYA M. DENNIS

03/10/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name WESTER, THOMAS
Address 3991 SE SR 21
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title DIRECTOR
Name JACKSON, BILL
Address 4854 S.E. 6TH LANE
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title PRESIDENT
Name STANLAND, SCOTT
Address P.O. BOX 1385
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title SECRETARY
Name SAPP, TERI
Address P.O. BOX 1385
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title T
Name COX, MARIEN
Address 7063 KING ST.
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title D
Name BUCKNER, PAULA B
Address 4601 SE 6TH LN
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title DIRECTOR
Name FINDLEY, DANIEL
Address P.O. BOX 1385
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title DIRECTOR
Name CONNER, STEVE
Address P.O. BOX 1385
City-State-Zip: KEYSTONE HEIGHTS FL 32656

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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: TANYA M. DENNIS**DIRECTOR**

03/10/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	DENNIS, TANYA M
Address	P.O. BOX 1385
City-State-Zip:	KEYSTONE HEIGHTS FL 32656