

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17230 (6)

1. Corporation Name

FIRST PRESBYTERIAN CHURCH OF LAKE CITY, FLORIDA,
INC.



Principal Place of Business

Mailing Address

C/O DR. DOUGLAS S. BARRANGER
1233 WEST BAYA AVENUE
LAKE CITY FL 32025-4211
US

C/O DR. DOUGLAS S. BARRANGER
1233 WEST BAYA AVENUE
LAKE CITY FL 32025-4211
US

3. Date Incorporated or Qualified
10/09/1986

3a. Date of Last Report
04/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1319085

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

City & State

28

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARRANGER, DOUGLAS S.
1233 WEST BAYA AVENUE
LAKE CITY FL 32055

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Douglas S. Barranger, Sr. Pastor

4/19/96

Signature typed or printed name of registered agent and then applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME BROWN, CLARENCE E.
STREET ADDRESS LIVE OAK HWY
CITY-ST-ZIP LAKE CITY FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD ☐ DELETE
NAME HENDERSON, F.W.
STREET ADDRESS 135 OAK AVE
CITY-ST-ZIP LAKE CITY FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD ☐ DELETE
NAME KILLIAN, JANE C.
STREET ADDRESS RT 12, BOX 316
CITY-ST-ZIP LAKE CITY FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE T ☐ DELETE
NAME HACKNEY, T.A.
STREET ADDRESS LIVE OAK HWY
CITY-ST-ZIP LAKE CITY FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME DANA, ROSE-MARIE
STREET ADDRESS RR 13, BOX 523
CITY-ST-ZIP LAKE CITY FL

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME FRASER, MARTHA C.
5.3 STREET ADDRESS RR 6, BOX 447
5.4 CITY-ST-ZIP LAKE CITY, FL 32025

TITLE D ☒ DELETE
NAME BECKMAN, KAY C.
STREET ADDRESS RT 14 BOX 202E
CITY-ST-ZIP LAKE CITY FL

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME ST. JOHN, MARTIN
6.3 STREET ADDRESS 920 EL PRADO ST.
6.4 CITY-ST-ZIP LAKE CITY, FL 32025

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Douglas S. Barranger

4/19/96

(904) 752-0670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)