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Mar 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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

4. FEI Number

59-1319085

Applied For

Not Applicable

2. Principal Place of Business

21 c/o John E. Norris

2a. Mailing Address

26 c/o John E. Norris

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1233 West Baya Avenue

27 1233 West Baya Avenue

City & State

City & State

23 Lake City, FL

28 Lake City, FL

Zip

Country

Zip

Country

24 32025-4211

25 US

29 32025-4211

30 US

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

John E. Norris

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

201 N. Marion Street, Suite 301

83

84 City

Lake City

FL

85 Zip Code
32055

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

John E. Norris
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/4/98
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **NORRIS, JOHN E**
STREET ADDRESS **3227 INGLEWOOD DR**
CITY-ST-ZIP **LAKE CITY FL**

1.1 TITLE ☐ Change ☐ Addition

TITLE **VD** ☐ DELETE

NAME **HENDERSON, F.W.**
STREET ADDRESS **135 OAK AVE**
CITY-ST-ZIP **LAKE CITY FL**

2.1 TITLE ☐ Change ☐ Addition

TITLE **SD** ☐ DELETE

NAME **KILLIAN, JANE C.**
STREET ADDRESS **RT 12, BOX 316**
CITY-ST-ZIP **LAKE CITY FL**

3.1 TITLE ☐ Change ☐ Addition

TITLE **T** ☐ DELETE

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

4.1 TITLE ☐ Change ☐ Addition

TITLE **D** ☐ DELETE

NAME **FRASER, MARTHA C.**
STREET ADDRESS **RR 6 BOX 447**
CITY-ST-ZIP **LAKE CITY FL**

5.1 TITLE ☐ Change ☐ Addition

TITLE **D** ☐ DELETE

NAME **ST. JOHN, MARTIN**
STREET ADDRESS **920 EL PRADO ST**
CITY-ST-ZIP **LAKE CITY FL**

6.1 TITLE ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

John E. Norris

John E. Norris,
President

3/4/98

904/752-7240

CR2E037 (10/97)