2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State
04-14-2004 90033 029 ****61.25

DOCUMENT # N93000004608

1. Entity Name
FIRST CHRISTIAN CHURCH OF LAKE CITY, INC.

Principal Place of Business	Mailing Address
P.O. BOX 967 LAKE CITY, FL 32056 US	P.O. BOX 967 LAKE CITY, FL 32056 US

24041472

01062004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
403 West Duval	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lake City, Florida	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2358745 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KINNAMAN, RAYMOND E 900-B LOCKLYNN AVENUE LAKE CITY, FL 32-0258	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Raymond E. Kinnaman 4/11/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KINNAMAN, RAYMOND E 900-B LOCHLYNN AVENUE LAKE CITY, FL 33025	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	E ROSS, MORRIS 608 LOCKLYNN AVENUE LAKE CITY, FL 32025	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SISTRUNK, H.L. RT. 11, BOX 112-E LAKE CITY, FL 32024	☒ Delete	Elsie Carter 167 N. W. Austin Way Lake City, FL 32055	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HESS, LILLIAN RT. 12, BOX 238 LAKE CITY, FL 32025	☒ Delete	Kenneth Allen 518 Locklyn Ave Lake City, FL 32055	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Georgia Sherrill Georgia Sherrill, Secretary 4/11/04 386 752-2805
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #