2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004608

FILED Mar 28, 2009 Secretary of State

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

| | rincipal Place of Bu | ısiness: | New Principal Plac | New Principal Place of Business: | |
|---|---|-----------------------------|--|--|--|
| 403 WES1 LAKE CIT | FDUVAL Y, FL 32056 US | | | | |
| Current Mailing Address: | | | New Mailing Addre | New Mailing Address: | |
| P.O. BOX LAKE CIT | 967 Y, FL 32056 US | | | | |
| FEI Number | : 59-2358745 FEI I | Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of Curren | t Registered Agent: | Name and Address | of New Registered Agent: | |
| 403 W DÚ | VONCEIL IVAL Y, FL 32055 US | | | | |
| | e named entity submit e of Florida. | ts this statement for the p | urpose of changing its registe | red office or registered agent, or both, | |
| SIGNATUI | | | | | |
| | Electronic Sig | nature of Registered Age | ent | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHAN | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P () Delete CLARK, FAYE 403 WEST DUVAL ST LAKE CITY, FL 32056 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | S/T () Delete ANDREWS, CAROL 403 WEST DUVAL ST LAKE CITY, FL 32056 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | T () Delete SIGNER, RUTH 403 WEST DUVAL ST | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Address: City-St-Zip: | LAKE CITY, FL 32056 | 05 | ony or z.p. | | |
| | D () Delete ROSS, MORRIS 403 WEST DUVAL LAKE CITY, FL 32056 | | Title: Name: Address: City-St-Zip: | () Change() Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FAYE CLARK PRES 03/28/2009