FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

201 LAVISTA ST

748250

(8)

Mailing Address 201 LAVISTA ST

NEW LIFE PI	RESBYTERIAN	CHURCH OF	LAKE	COUNTY.	INC
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FRUITLAND PARK FL 34731		FRUITLAND PARK FL 34731-4423			•						
						3.	Date incorporated or Qualifie 07/30/1979	ed 3a. D	ate of Last R 02/16/19	leport 196	
2. Principal Pi	ace of Business	2a. Mailing Address			•	4.	FEI Number 59-2050661		 	oplied For ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		************		5.	Certificate of Status Desired			Additional equired	
City & State City & Sta			tate			6.	Election Campaign Financing Trust Fund Contribution	, D	\$5.00 May Be Added to Fees		
Ζιρ 24	Country 25	Zip 29	30	intry		8.	This corporation has liability Florida Statutes	for intangible	tax under s		
	9. Name and Address of Current		14-1	l		10.	. Name and Address of New	*****			
				81	Name						
BIRNGA	I WILLIAM				Charact did	leles as de	0.0 0				
BIROSALL, WILLIAM VIA MARCIA STREET AT TRINITY TRAIL			82	Street Ad	IOress (F	P.O. Box Number is Not Accep	otable)				
	LAKE COMMUNITY			83	***************************************				· · · · · · · · · · · · · · · · · · ·		
	ND PARK FL										
HOHE	AID I FRIIS I II			84	City			FL	85 Zip	Code	
office or re	to the provisions of Sections 617,0502 egistered agent, or both, in the State of m familiar with, and accept the obliga	of Florida. Such change was a	authorize	d by	the corpor	orporatio ration's t	on submits this statement for the board of directors. I hereby ac	na murnosa d	f changing i	ts registered registered	
SIGNATURE											
	Signature, typed or printed name of registered agen			d Agen	k signature req			DATE			
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OF	FICERS AN			
TITLE	TSO	XX DELETE	1.1 71		i		· ·		Change	Addition	
NAME	LANDSTEDT, BARRY		1.2 N								
STREET ADDRESS	79 SANJAY LANE				ADORESS		•				
CITY - ST - ZIP	LEESBURY FL	DELETE		TY-ST	- ZIP	···········			I I Change	Addition	
TITLE	PD SUBDUM BOOKHARY	[DELETE	2.1 Ti				*		L Change	Addition	
NAME	PURDUM, ROSEMARY		2.2 N/								
STREET ADDRESS	33703 OVERTON DRIVE				ADORESS						
CITY-ST-ZIP	LEESBURG FL	Dourt		TY - \$1	T-ZIP			-	0	The admin	
TITLE	VD	☐ DELETE	3.1 Ti						Change	Addition	
NAME	SLOAN, MARY		3.2 N								
STREET ADDRESS	915 CABALLO ROAD				ADORESS						
CITY - ST - ZIP	LEESBURG FL	DELETE		ITY-\$1					Change	VV Addition	
TITLE		L., UCLEIC	4.1 (1			TSD			Change	XX Addition	
NAME			4.2 N			Scott	t Hindman				
STREE1 ADDRESS					ADDRESS 7	700 B	Boyleston St				
CITY - ST - ZIP		T I DELETE		1Y-ST	- ZIF	Leest	burg, FL 34748		Change	Addition	
TITLE		[] DELETE	5.1 TI		1				Li change	Addition	
NAME			5.2 N		1						
STREET ADDRESS					ADDRESS						
CITY - ST - ZIP				TY-ST	- ZIP						
TITLE		DELETE	6.1 Ti						Change	Addition	
NAME			62 N	AME							
STREET ADDRESS	•		6.3 ST	TREET A	ADDRESS						

14. I do 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.