I hereby certify that the information indicated on this report or supplemental report is true and accurate and ti oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this re above, or on an attachment with all other like empowered.		
SIGNATURE: PHYLLIS A. MCKNEELEN	CORP.SECRETARY/TREA	01/14/2015

SURER

SIGNATURE: PHYLLIS A. MCKNEELEN

Electronic Signature of Signing Officer/Director Detail

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.

#### SIGNATURE:

Electronic Signature of Registered Agent

# **Officer/Director Detail :**

Title	D	Title	TS
Name	LOTZE, ROBERT	Name	MCKNEELEN, PHYLLIS A
Address	480 115TH AVENUE	Address	8917 RIDGE ROAD
City-State-Zip:	TREASURE ISLAND FL 33706-3046	City-State-Zip:	SEMINOLE FL 33772
Title	DIRECTOR		
Title Name	DIRECTOR STOLZE, CHRIS		

# Certificate of Status Desired: No

FILED Jan 14, 2015 Secretary of State CC5563050523

Date

Date

# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### **DOCUMENT# 726096**

Entity Name: THE FIRST CHRISTIAN CHURCH OF SEMINOLE, INC.

# **Current Principal Place of Business:**

13272 PARK BOULEVARD SEMINOLE, FL 33776-3503

# **Current Mailing Address:**

13272 PARK BOULEVARD SEMINOLE. FL 33776-3503 US

FIRST CHRISTIAN CHURCH OF SEMINOLE

Name and Address of Current Registered Agent:

# FEI Number: 59-1718510

13272 PARK BLVD. SEMINOLE, FL 33776-3503 US