

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002636

Entity Name: CHRISTIAN STUDY CENTER OF GAINESVILLE, INC.

Current Principal Place of Business:

112 NW 16TH ST.
GAINESVILLE, FL 32603-1827

Current Mailing Address:

112 NW 16TH ST.
GAINESVILLE, FL 32603-1827 US

FEI Number: 59-3638273

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LYNCH, JAMES WJR.
112 NW 16TH ST.
GAINESVILLE, FL 32603-1827 US

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

Date

Officer/Director Detail :

Title D/P
Name LYNCH, JAMES WJR.
Address 112 NW 16TH ST.
City-State-Zip: GAINESVILLE FL 32603-1827

Title D/T
Name KURDZIEL, KENNETH F
Address 3619 NW 18 PLACE
City-State-Zip: GAINESVILLE FL 32605-3675

Title DIRECTOR
Name HAMERSMA, SARAH
Address 521 CUMBERLAND AVENUE
City-State-Zip: SYRACUSE NY 13210-2621

Title D
Name CURTIS, BARRY
Address 8433 NW 64 LANE
City-State-Zip: GAINESVILLE FL 32653-2986

Title D
Name LADD, TONY
Address 2632 NW 29 PLACE
City-State-Zip: GAINESVILLE FL 32606-2857

Title DIRECTOR
Name DUNN, NICK
Address 301 S RUSSELL ST
City-State-Zip: CHAMPAIGN IL 61821

Title DIRECTOR
Name SARAJEDINI, VICKY
Address 10417 SW 21ST AVENUE
City-State-Zip: GAINESVILLE FL 32607-3264

I hereby 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 all other like empowered.

SIGNATURE: JAMES W. LYNCH, JR.

PRESIDENT

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date