## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008526

Entity Name: FULL GOSPEL CHRISTIAN CENTER, INC.

**FILED** Feb 12, 2014 **Secretary of State** CC7375388396

## **Current Principal Place of Business:**

159 N. GAINES STREET OAK HILL. FL 32759

## **Current Mailing Address:**

P.O. BOX 125

OAK HILL. FL 32759 US

FEI Number: 27-1502437 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

VANORSDALE, CHARLES R 139 N GAINES STREET OAK HILL, FL 32759 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 Title **EXECUTIVE SECRETARY** VANORSDALE, CHARLES R VANORSDALE, JOAN E Name Name

139 N GAINES STREET 139 N GAINES STREET Address Address PO BOX 125

PO BOX 125

City-State-Zip: OAK HILL FL 32759 City-State-Zip: OAK HILL FL 32759

Title **CO-TRUSTEE** Title TRUSTEE

Name HENSLEY, GARY Name OGLESBY, HAROLD ROBERT

1725 WILLOW OAK DR 445 PERDITA Address Address

City-State-Zip: EDGEWATER FL 32132 City-State-Zip: EDGEWATER FL 32132

Title **TREASURER** 

Name KEMP, STEPHEN G SR. Address 3412 LIME TREE DR City-State-Zip: EDGEWATER FL 32141

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: CHARLES R VANORSDALE

**PASTOR** 

02/12/2014