

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32756

**Entity Name:** THE FIRST PRESBYTERIAN CHURCH OF LAKE PLACID,  
FLORIDA ASSOCIATE REFORMED SYNOD, INC.**FILED**  
**Mar 19, 2014**  
**Secretary of State**  
**CC7009953348****Current Principal Place of Business:**117 NORTH OAK AVE  
LAKE PLACID, FL 33852**Current Mailing Address:**118 NORTH OAK AVE  
LAKE PLACID, FL 33852**FEI Number: 59-2956007****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HARRIS, BERT J., III  
401 DAL HALL BOULEVARD  
LAKE PLACID, FL 33852 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	TRUSTEE
Name	KARLSON, PAMELA
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TRUSTEE
Name	MORRIS, HAL
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TRUSTEE
Name	CASH, MORRIS
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TREASURER
Name	PAELOW, LIBBY
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TRUSTEE
Name	LOHRER, CHARLOTTE
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TRUSTEE
Name	BLACKWELL, GINNY
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TRUSTEE
Name	TRUITT, ZOLA
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

Title	TRUSTEE
Name	DOWLING, MARIAN
Address	117 NORTH OAK AVE
City-State-Zip:	LAKE PLACID FL 33852

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*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: PAMELA T KARLSON****TRUSTEE****03/19/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name SENN, JEFF  
Address 117 NORTH OAK AVENUE  
City-State-Zip: LAKE PLACID FL 33852

Title TRUSTEE  
Name VELEY, DAVID  
Address 117 NORTH OAK AVE  
City-State-Zip: LAKE PLACID FL 33852