

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44930

Entity Name: RIVER OAKS PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

405 WASHINGTON AVE
LAKE MARY, FL 32746

Current Mailing Address:

405 WASHINGTON AVE
LAKE MARY, FL 32746 US

FEI Number: 59-3062688

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCCULLARS, CHRISTI LEIGH ESQ.
416 HILGARD COVE
LAKE MONROE, FL 32771 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: CHRISTI MCCULLARS, ESQ.

04/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR, ELDER
Name CAMERA, DAVID P
Address 321 OLD MARY COVE
City-State-Zip: LAKE MARY FL 32746

Title TREASURER
Name PULLIS, DALE R
Address 512 WOODSTEAD COURT
City-State-Zip: LONGWOOD FL 32779

Title SECRETARY, ELDER
Name BREHM, CHRISTOPHER
Address 108 BROWN DRIVE
City-State-Zip: SANFORD FL 32773

Title ELDER
Name LILJEROS, FRANK
Address 320 KIMBERLY CT.
City-State-Zip: SANFORD FL 32771

Title PASTOR, ELDER
Name LANIER, GREGORY
Address 843 ROYALWOOD LANE
City-State-Zip: OVIEDO FL 32765

Title ELDER
Name PICKENS, THOMAS
Address 221 PORTSMOUTH COVE
City-State-Zip: LONGWOOD FL 32779

Title DEACON
Name GREGORY, NORMAN
Address 1950 LAKE MARKHAM RD.
City-State-Zip: SANFORD FL 32771-8968

Title DEACON
Name HOOVER, GREGORY
Address 712 TREELINE PL.
City-State-Zip: SANFORD FL 32771-7101

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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: DALE R. PULLIS

TREASURER

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DEACON
Name O'DOWD, STEVEN
Address 281 LIVERPOOL COVE
City-State-Zip: LONGWOOD FL 32779-5638

Title DEACON
Name TAYLOR, DAVID
Address 486 WOLDUNN CIR.
City-State-Zip: LAKE MARY FL 32746