

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90017 013 ****61.25

DOCUMENT # 704741 1. Entity Name FIRST ASSEMBLE OF GOD, INC. OF LAKE CITY, FLORIDA	
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Principal Place of Business 1571 E. DUVAL ST LAKE CITY FL 32055	Mailing Address 1571 E. DUVAL ST LAKE CITY FL 32055
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-1502613	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent TAYLOR, SAM 316 SW HEALAN CT FT. WHITE FL 32028	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature is used when registering) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
D HARRISS, JEAN 1315 SW CASTLE HEIGHTS TERR LAKE CITY FL 32025	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
ST CHRISTIE, DOT XXXXXXX 118 S.E. Whistle Loop LAKE CITY FL 32025	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
D CHANDLER, WILLIAM 1571 E. DUVAL ST 175 S.E. Beech St. LAKE CITY FL 32025	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☒ Delete
D KENT, CHARLES 453 SW JAFUS AVE LAKE CITY FL 32024	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☒ Addition
D Christie, Dot 118 S.E. Whistle Loop Lake City, FL 32025	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dot Christie Dot Christie, ST 2/26/08 (386) 752-2195