

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 7:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 728628 (9)
1. Corporation Name
FAITH COMMUNITY CHURCH, INC. OF LARGO

Principal Place of Business

Mailing Address

7100 142ND AVE. NORTH
LARGO FL 34641-4603

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LARGO FL 34641-4603

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/23/1974

3a. Date of Last Report

04/29/1994

4. FEI Number

59-1777403

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OKERSTROM, DAVID
2209 RIVERSIDE DRIVE
CLEARWATER FL 33516

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	● D
NAME	NATE, TRACY
STREET ADDRESS	11483 OVAL DR E
CITY - ST - ZIP	LARGO FL
TITLE	D
NAME	DWIGHT, MARTIN
STREET ADDRESS	7572 91 ST
CITY - ST - ZIP	SEMINOLE FL
TITLE	D
NAME	MYERS, TERRY
STREET ADDRESS	12874-97 ST. N.
CITY - ST - ZIP	LARGO FL
TITLE	S
NAME	PADLEY, FORREST E
STREET ADDRESS	183 49 AVE N
CITY - ST - ZIP	ST PETERSBURG FL
TITLE	D
NAME	MORTOA, IVAN
STREET ADDRESS	202 HERON RD
CITY - ST - ZIP	CLEARWATER FL
TITLE	TREASURER
NAME	Richard Lunt
STREET ADDRESS	2379- BARCELONIA DR
CITY - ST - ZIP	DUNEDIN, FL 34618

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Forrest E. Padley

Date

Daytime (Area #)

4/24/95 813-531-3891