## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 728887** 

FILED Apr 30, 2009 Secretary of State

Entity Name: GLAD TIDINGS ASSEMBLY OF GOD OF LAKE CITY, FLORIDA, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

993 N.W. LAKE JEFFERY ROAD LAKE CITY, FL 32025

Current Mailing Address: New Mailing Address:

P.O. BOX 7 LAKE CITY, FL 32056

FEI Number: 59-6559352 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VAN VLECK, LOWELL D 4414 NW WISTERIA DRIVE LAKE CITY, FL 32055 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

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 OD (X) Change () Addition

 Name:
 VAN VLECK, L.D.
 Name:
 VAN VLECK, LOWELL D

 Address:
 4414 NW WISTERIA DRIVE
 Address:
 4414 NW WISTERIA DRIVE

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 LAKE CITY, FL 32055

Title: S () Delete Title: () Change () Addition

 Name:
 TRULUCK, CHARLOTTE
 Name:

 Address:
 132 N.E. PATTERSON AVE.
 Address:

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PRIEST, JUNE
 Name:

 Address:
 6944 NW LAKE JEFFERY RD.
 Address:

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LEVERETT, LEWIS
 Name:

 Address:
 1978 SE GILESMARTIN AVE
 Address:

 City-St-Zip:
 LAKE CITY, FL 32024
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LOWELL D. VAN VLECK OD 04/30/2009