

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N19756** (8)
1. Corporation Name
LIBERTY BAPTIST CHURCH OF LAKE CITY, INC.

Principal Place of Business RT. 10 BOX 948 MARVIN BARNETT RD. LAKE CITY FL 32025	Mailing Address RT. 10 BOX 948 MARVIN BARNETT RD. LAKE CITY FL 32025
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3. Date Incorporated or Qualified

03/20/1987

4. FEI Number

59-2893228

Applied For
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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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. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RAWLINS, JAMES L
RT. 10 BOX 948
LAKE CITY FL 32025**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	RAWLINS, JAMES L
STREET ADDRESS	RT. 10 BOX 948
CITY-ST-ZIP	LAKE CITY FL 32025
TITLE	VD <input type="checkbox"/> DELETE
NAME	WILLIAMS, JOHN A
STREET ADDRESS	RT. 7, BOX 801
CITY-ST-ZIP	LAKE CITY FL 32055
TITLE	TD <input type="checkbox"/> DELETE
NAME	BROWN, BRUCE
STREET ADDRESS	RT. 19 BOX 866
CITY-ST-ZIP	LAKE CITY FL 32025
TITLE	SD <input type="checkbox"/> DELETE
NAME	REEDER, WAYNE
STREET ADDRESS	RT. 15 BOX 85
CITY-ST-ZIP	JACKSONVILLE FL 32234
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	RUCKER, KENDRICK
STREET ADDRESS	RT. 3 BOX 247
CITY-ST-ZIP	LAKE CITY FL 32025
TITLE	Since Taylor <input checked="" type="checkbox"/> DELETE
NAME	2090 NE 80th Ave
STREET ADDRESS	High Springs FL 32643-9748
CITY-ST-ZIP	61 32643-9748

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	D Robert Vincent Taylor
1.3 STREET ADDRESS	2090 NE 80th Ave
1.4 CITY-ST-ZIP	High Springs FL 32643-9748
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **James L Rawlins** **James L Rawlins** 2/5/98 (904) 755-4423

CR2E037 (10/97)