

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 27 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N94000002289 (6)

1. Corporation Name

THE LIVING FAITH CHURCH OF COLUMBIA COUNTY, INC.



Principal Place of Business

RT 18 BOX 540
SISTERS WELCOME RD
LAKE CITY FL 32025

Mailing Address

P O BOX 7264
SISTERS WELCOME RD
LAKE CITY FL 32055-0264
US

3. Date Incorporated or Qualified
05/09/1994

3a. Date of Last Report
02/09/1996

2. Principal Place of Business

21 RT 18 Box 624

2a. Mailing Address

26 P.O. Box 2238

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Lake City, FL

City & State

28 Lake City, FL

Zip

24 32025

Country

25 Columbia

Zip

29 32056

Country

30 Columbia

4. FEI Number

59-6205643

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PEELER, EARL
ROUTE 15, BOX 1387
LAKE CITY FL 32055

81 Name

EARL Peeler

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

RT 18 Box 624

83

84 City

Lake City

FL

85 Zip Code

32025

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 EARL PEELER

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5-3-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME PEELER, EARL
STREET ADDRESS BOX 2238
CITY-ST-ZIP LAKE CITY FL 32055

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

President
Earl Peeler
P.O. Box 2238 4 Cannon Bridge Road
Lake City, FL 32056

TITLE VD ☒ DELETE

NAME REDDISH, EARL C
STREET ADDRESS RT 17 BOX 373-A
CITY-ST-ZIP LAKE CITY FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

V President
Dale Marshall
RT 3 Box 1083
Lake City, FL 32055 NA

TITLE ST ☐ DELETE

NAME MARSHALL, DALE
STREET ADDRESS RT 3 BOX 1083
CITY-ST-ZIP LAKE CITY FL 32025

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

S. Dale Marshall
RT 3 Box 1083
Lake City, FL 32025 NA

TITLE T ☒ DELETE

NAME REDDISH, JEWELL
STREET ADDRESS RT 17 BOX 373-A
CITY-ST-ZIP LAKE CITY FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

T
Earl Peeler
P.O. Box 2238 4 Cannon Bridge Road
Lake City, FL 32056

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Steve Parsons
RT 8 Box 335-L
Lake City, FL 32055 NA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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.

CR2E037 (9/96)