

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 700923

**Entity Name:** FLORIDA CONFERENCE ASSOCIATION OF SEVENTH-DAY ADVENTISTS

**Current Principal Place of Business:**

351 SOUTH STATE ROAD 434  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

351 SOUTH STATE ROAD 434  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number: 59-6137501**

**Certificate of Status Desired: No**

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

ELLIOTT, ANDREW  
351 SOUTH STATE ROAD 434  
ALTAMONTE SPRINGS, FL 32714 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: ANDREW ELLIOTT

02/08/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name CAULEY, MICHAEL F  
Address 1225 GOLF POINT LOOP  
City-State-Zip: APOPKA FL 32712  
  
Title ASATD  
Name ELLIOTT, ANDREW  
Address PO BOX 161016  
City-State-Zip: ALTAMONTE SPRINGS FL 32716  
  
Title SD  
Name BOND, PHILIP J  
Address 1428 PAULA DRIVE  
City-State-Zip: APOPKA FL 32703

Title VPD  
Name COCHRAN, WILLIAM  
Address 1506 LITCHEM ROAD  
City-State-Zip: APOPKA FL 32712  
  
Title VPTD  
Name RAHMING, ELISA T  
Address 207 HERON ST  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*I hereby 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 all other like empowered.*

SIGNATURE: ANDREW ELLIOTT

ASSISTANT SECRETARY 02/08/2018

Electronic Signature of Signing Officer/Director Detail

Date