

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705614

FILED
Jan 29, 2018
Secretary of State
CC7652883191

Entity Name: THE TANGERINE COMMUNITY CHURCH, INC.

Current Principal Place of Business:

7141 WRIGHT AVE
TANGERINE, FL 32777

Current Mailing Address:

P.O. BOX 281
TANGERINE, FL 32777

FEI Number: 59-2813841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STROUP, LILLIAN
8200 EARLWOOD AVENUE
TANGERINE, FL 32757 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

Officer/Director Detail :

Title O
Name MASTERTON, DAVID
Address 6155 ALLEN ST.
City-State-Zip: MOUNT DORA FL 32757

Title TD
Name STROUP, LILLIAN
Address 8200 EARLWOOD AVE
City-State-Zip: MOUNT DORA FL 32757

Title OTHER
Name GIROUX, ALAN
Address 28929 TAMMI DR.
City-State-Zip: TAVARES FL 32778

Title VC
Name TUCKER, ANNE J
Address 25305 DARNOCH ST.
City-State-Zip: SORRENTO FL 32776

Title COUNCIL MEMBER
Name BLUME, NICK
Address 2647 LAKE GRASSMERE CIR
City-State-Zip: ZELLWOOD FL 32798

Title COUNCIL MEMBER
Name BRAMER, LINDA
Address PO BOX 615
City-State-Zip: TANGERINE FL 32777

Title OTHER
Name ESTEY, WES
Address 7681 LAKE ANDREA CIC
City-State-Zip: MOUNT DORA FL 32757

Title SECRETARY
Name GRINNELL, MARJORIE RUTH
Address PO BOX371
City-State-Zip: TANGERINE FL 32777

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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: LILLIAN STROUP

TREASURER

01/29/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title COUNCIL MEMBER
Name SPERBECK, BARBARA
Address 1917 SYCAMORE CIRCLE
City-State-Zip: TAVARES FL 32778

Title COUNCIL MEMBER
Name CORBETT, STEVE
Address P.O. BOX 180
City-State-Zip: TAVARES FL 32778