#### **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 705614** 

Entity Name: THE TANGERINE COMMUNITY CHURCH, INC.

FILED Feb 07, 2022 Secretary of State 3713630555CC

# **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 TD Title OTHER

Name STROUP LILLIAN Name GIROUX

NameSTROUP, LILLIANNameGIROUX, ALANAddress8200 EARLWOOD AVEAddress28929 TAMMI DR.City-State-Zip:MOUNT DORA FL 32757City-State-Zip:TAVARES FL 32778

Title VC Title COUNCIL MEMBER

Name TUCKER, ANNE J Name BLUME, NICK

Address 25305 DARNOCH ST. Address 2647 LAKE GRASSMERE CIR

City-State-Zip: SORRENTO FL 32776 City-State-Zip: ZELLWOOD FL 32798

Title COUNCIL MEMBER Title OTHER

Name BRAMER, LINDA Name ESTEY, WES

Address PO BOX 615 Address 7681 LAKE ANDREA CIC
City-State-Zip: TANGERINE FL 32777 City-State-Zip: MOUNT DORA FL 32757

Title SECRETARY Title COUNCIL CHAIRMAN Name KLIEN, MARY Name STEVE CORBETT

Address 7199 SCOTT AVENUE Address P.O. BOX 180

City-State-Zip: MOUNT DORA FL 32757 City-State-Zip: TAVARES FL 32778

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 02/07/2022