

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001614

**FILED**  
**Jan 16, 2014**  
**Secretary of State**  
**CC5895145439**

**Entity Name:** CORNERSTONE CHRISTIAN CHURCH, INC.

**Current Principal Place of Business:**

14047 ALABAMA ST  
JAY, FL 32565

**Current Mailing Address:**

P.O. BOX 236  
JAY, FL 32565

**FEI Number: 61-1606145**

**Certificate of Status Desired: No**

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

BARROW, FREDERICK PASTOR  
4200 HWY 4 EAST  
JAY, FL 32565 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            D  
Name            HARRIS, KIRBY DEACON  
Address        4981 GREENWOOD RD  
City-State-Zip: JAY FL 32565

Title            D  
Name            ELLIS, JASON DEACON  
Address        136561 HIGHWAY 87 NORTH  
City-State-Zip: JAY FL 32565

Title            P  
Name            BARROW, FREDERICK PASTOR  
Address        4200 HWY 4 EAST  
City-State-Zip: JAY FL 32565

Title            T  
Name            STRICKLING, KEITH  
Address        3059 HARVEST RD  
City-State-Zip: JAY FL 32565

*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: KEITH STRICKLING**

**TREASURER**

**01/16/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date