

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001260

**Entity Name:** OLIVE LEAF CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

16104 HANNA RD  
LUTZ, FL 33549-5737

**Current Mailing Address:**

P.O. BOX 273211  
TAMPA, FL 33688 US

**FEI Number:** 65-0565762

**Certificate of Status Desired:** No

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

FARRAGUT, ANITRA LREV.  
14022 ARBOR KNOLL CIRCLE  
TAMPA, FL 33625 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	ST	Title	PD
Name	FARRAGUT, WILLIAM	Name	FARRAGUT, ANITRA LREV.
Address	14022 ARBOR KNOLL CIR.	Address	14022 ARBOR KNOLL CIR.
City-State-Zip:	TAMPA FL 33625	City-State-Zip:	TAMPA FL 33625
Title	T		
Name	MURDOCK, JEANETTE		
Address	1109 BELLE CHASE CIRCLE		
City-State-Zip:	TAMPA FL 33636		

*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:** REV. ANITRA L. FARRAGUT

**DIRECTOR**

**04/23/2013**

Electronic Signature of Signing Officer/Director Detail

Date