

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708096

FILED  
Apr 21, 2005  
Secretary of State

**Entity Name:** CHURCH OF THE PALMS-PRESBYTERIAN (U.S.A.), INC.

**Current Principal Place of Business:**

3224 BEE RIDGE RD.  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

3224 BEE RIDGE RD.  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:** 59-0995240

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ZIMMERMAN, DAVID  
1534 OAK WAY  
SARASOTA, FL 34232 US

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

FELCH, JACK DR  
3224 BEE RIDGE RD.  
SARASOTA, FL 34239 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: JACK FELCH

04/21/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ZIMMERMAN, DAVID  
Address: 1534 OAK WAY  
City-St-Zip: SARASOTA, FL 34232

Title: VD ( ) Delete  
Name: SAVARY, JOHNSON  
Address: 1671 SOUTH DR.  
City-St-Zip: SARASOTA, FL 34239

Title: SD ( ) Delete  
Name: ANGLE, RAYMOND  
Address: 7720 BROADMOOR PINES BLVD.  
City-St-Zip: SARASOTA, FL 34243

Title: TD ( ) Delete  
Name: COUNEN, MICHAEL  
Address: 4791 DOVE TAIL CT.  
City-St-Zip: SARASOTA, FL 34238

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LORD, TODD  
Address: 3240 WALTER TRAVIS DRIVE  
City-St-Zip: SARASOTA, FL 34240

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAYMOND ANGLE

SD

04/21/2005

Electronic Signature of Signing Officer or Director

Date