

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716434

FILED
Jul 01, 2005
Secretary of State

Entity Name: WESTMINSTER PRESBYTERIAN CHURCH UNITED OF GAINESVILLE, FLORIDA, INC.

Current Principal Place of Business:

1521 N.W. 34TH ST.
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

1521 N.W. 34TH ST.
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-6215886 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SINGLEY, DR. ED
1719 N W 23RD BLVD PH-E
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: EITZMAN, DON
Address: 1415 NW 35 TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: DV () Delete
Name: SCOTT, BARBARA
Address: 2905 NW 33 PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: LEE, MARIE
Address: 7851 NE 176 AVENUE
City-St-Zip: WILLISTON, FL 32696

Title: DS () Delete
Name: PARKER, DONNA
Address: 2915 NW 33 PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: DS () Delete
Name: BLACK, JOE D
Address: 3130 NW 9TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: NEWNAN, ANN
Address: 8620-425 NW 13 STREET
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: COMSTOCK DP, RICHARD
Address: 10001 NW 59 PLACE
City-St-Zip: GAINESVILLE, FL 32653

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

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

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

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

Title: D (X) Change () Addition
Name: ROBINSON, BRENDA
Address: P. O. BOX 5536
City-St-Zip: GAINESVILLE, FL 32627

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: BRENDA ROBINSON

D

07/01/2005

Electronic Signature of Signing Officer or Director

Date