

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
FLORIDA DEPARTMENT OF STATE
Sandra B. McWilliam
DIVISION OF CORPORATIONS

DOCUMENT # 716982 (4)
1. Corporation Name
WESTMINSTER PRESBYTERIAN CHURCH OF CASSELBERRY, INC.

Principal Place of Business Mailing Address
2641 RED BUG ROAD CASSELBERRY FL 32707 US
2641 RED BUG ROAD CASSELBERRY FL 32707 US

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date Incorporated or Qualified
08/11/1969
4. FEI Number Applied For
59-1576751 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No NA

9. Name and Address of Current Registered Agent
LOWTHER, GARY
1324 RASPBERRY CT
CASSELBERRY FL 32707

10. Name and Address of New Registered Agent
81 Name MARY L. VILLILO
82 Street Address (P.O. Box Number is Not Acceptable) 426 Hornbill Place
83
84 City Winter Springs FL 85 Zip Code 32708

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE Mary L. Villilo MARY L. VILLILO - Clerk of Session 4/9/98
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	LOWTHER, GARY	
STREET ADDRESS	1324 RASPBERRY CT.	
CITY-ST-ZIP	CASSELBERRY FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	THOMPSON, DONNA	
STREET ADDRESS	3988 BUGLER'S REST PLACE	
CITY-ST-ZIP	CASSELBERRY FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	VILLILO, MARY	
STREET ADDRESS	426 HORNBILL PLACE	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	SMITH, HARRY	
STREET ADDRESS	3535 MUNSEY PLACE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> president	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Donna Thompson	
1.3 STREET ADDRESS	3988 Bugler's Rest Place	
1.4 CITY-ST-ZIP	Casselberry, FL 32707	
2.1 TITLE	<input checked="" type="checkbox"/> Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Jim Ellerbe	
2.3 STREET ADDRESS	1000 Sileo Branch	
2.4 CITY-ST-ZIP	Oviedo, FL 32765	
3.1 TITLE	<input checked="" type="checkbox"/> secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	same	
3.3 STREET ADDRESS	→	
3.4 CITY-ST-ZIP	→	
4.1 TITLE	<input checked="" type="checkbox"/> Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	same	
4.3 STREET ADDRESS	→	
4.4 CITY-ST-ZIP	→	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 (changed, or on an attachment with an address).

SIGNATURE: Mary L. Villilo MARY L. VILLILO clerk of session 4/9/98 407-339-1100

CR2E037 (10/97)