

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738103

FILED
Apr 18, 2008
Secretary of State

Entity Name: FOREST HILLS PRESBYTERIAN CHURCH

Current Principal Place of Business:

709 W. LINEBAUGH AVE.
TAMPA, FL 336127853

New Principal Place of Business:

709 W. LINEBAUGH AVE.
TAMPA, FL 336127853 US

Current Mailing Address:

709 W. LINEBAUGH AVE.
TAMPA, FL 336127853

New Mailing Address:

709 W. LINEBAUGH AVE.
TAMPA, FL 336127853 US

FEI Number: 59-0919399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NELSON, EDWIN M
18918 PLACE MARQUETTE
LUTZ, FL 33549 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: PD () Delete
Name: ALBRIGHT, DOROTHY
Address: 2620 BENTLEY DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: SD () Delete
Name: MANUEL, MADELINE
Address: 14806 WINDING CREEK COURT
City-St-Zip: TAMPA, FL 33613

Title: TD () Delete
Name: HELSING, DAVID
Address: 3306 DEL PRADO CT
City-St-Zip: TAMPA, FL 33614

Title: D () Delete
Name: RAULERSON, JOHN
Address: 6302 E 113TH AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: BURSACK, QUINN
Address: 16010 WYNDOVER RD
City-St-Zip: TAMPA, FL 33647

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 exemption stated in Chapter 119, 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: DOROTHY ALBRIGHT

PD

04/18/2008

Electronic Signature of Signing Officer or Director

_____ Date