2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#738103

FILED Apr 09, 2009 Secretary of State

Entity Name: FOREST HILLS PRESBYTERIAN CHURCH

Current Principal Place of Business: New Principal Place of Business:

709 W. LINEBAUGH AVE. TAMPA, FL 336127853 US

Current Mailing Address: 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: Name and Address of New Registered Agent:

NELSON, EDWIN M 18918 PLACE MARQUETTE LUTZ, FL 33549 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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

 Name:
 ALBRIGHT, DOROTHY
 Name:
 SICA, PAM

 Address:
 2620 BENTLEY DRIVE
 Address:
 3712 HAVERHILL DR.

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:
 TAMPA, FL 33618

Title: SD () Delete Title: () Change () Addition

 Name:
 BURSACK, QUINN
 Name:

 Address:
 16010 WYNDOVER RD
 Address:

 City-St-Zip:
 TAMPA, FL 33647
 City-St-Zip:

 Name:
 HELSING, DAVID
 Name:
 FUNDERBURK, BETH

 Address:
 3306 DEL PRADO CT
 Address:
 10127 DOWNEY LANE

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:
 TAMPA, FL 33626

Title: D () Delete Title: D (X) Change () Addition

Name: RAULERSON, JOHN Name: NELSON, EDWIN

Address: 6302 E 113TH AVE Address: 18918 PLACE MARQUETTE

City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: LUTZ, FL 33549

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: PAM SICA PD 04/09/2009