Applied For

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 739954

FIRST PRESBYTERIAN CHURCH OF LAKELAND, FLORIDA, **INCORPORATED**

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

175 LAKE HOLLINGSWORTH DRIVE LAKELAND FL 33801-5697

2. Principal Place of Business

Suite, Apt. #, etc.

175 LAKE HOLLINGSWORTH DRIVE LAKELAND FL 33801-5697

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90043 017 ****61.25



3. Date incorporated or Qualifed

08/22/1977

4. FEI Number

	,	<u>├</u>		•		E0 0000004		 			
22		27			<u>-</u> -	59-0683261			Applicable		
City & Sta	& State City & State					5. Certificate of Status Desired		\$8.75 A Fee Re			
Zip	Country	Zip	ntry		6. Election Campaign Financing		\$5.00	May Re			
24	25	29	30			Trust Fund Contribution			Fees		
•		10. Name and Address of New Registered Agent									
				81 Name	e						
DODEDTO	}	82 Stree	t Address (P.O. Box Number is Not Acceptable)								
ROBERTS	ľ	31100	Officer Address (1.0. Box Hallion to Not Newspaper)								
1446 OAKLAWN PLACE LAKELAND FL 33803					83						
					84 City 85 Zip Code						
						<u> </u>	FL	- `			
11. Pursuant	to the provisions of Sections 617.0502 registered agent, or both, in the State of	and 617.1508, Florida Stat	utes, the ab	ove-name	d corpora	tion submits this statement for the	purpose of	changing its i	registered		
agent. I a	registered agent, or both, in the state of im familiar with, and accept the obligation	ons of, Section 617.0503, F	Iorida Statu	tes.	porations	board of directors. Thereby acce	pt alle appe	manom as rog	noter ou		
SIGNATURE											
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered /	Agent signatur	e required wh		DATE				
12.	OFFICERS AND		13.		_	ADDITIONS/CHANGES TO OF	FICERS A				
TITLE	PD	☐ DELETE	1,1 TITU	Æ				🐴 Change	☐ Addition		
NAME	YOUNG, JIM		1.2 NA	ΜE	P	D Brooks Chan	dler				
STREET ADDRESS	2923 SHOAL CREEK VILLAGE DI	₹	1.3 STF	REET ADDRES	s	203 Hibrite	n Way				
CITY-ST-ZIP	LAKELAND FL		1.4 CIT	Y-ST-ZIP		Lakeland, E	133	803			
TITLE	TD	DELETE	2.1 TITL	E		•		Change	☐ Addition		
NAME	FETHERMAN, CRAIG		2.2 NA	Æ							
STREET ADDRESS	1744 ROSSHIRE CT		2.3 STF	REET ADDRES	s						
CITY-ST-ZIP	LAKELAND FL		2. 4 CIT	Y-ST-ZIP				•			
TITLE	CD	☐ DELETE	3.1 TITL	.E	CI)		X Change	☐ Addition		
NAME	WALKER, DAVID G		3.2 NAM	Æ	B:	igley, James D.					
STREET ADDRESS	1835 STONECREST CT		3.3 STF	EET ADDRES	s 7:	34 Heartland Ci	r., B	1dg 7,	#734		
CITY-ST-ZIP	LAKELAND FL		3.4. CIT	Y-ST-ZIP	Mu Mu	lberry, FL 3	3860	- ,			
TITLE	VD	☐ DELETE	4.1 TI7L	E	VI			Change	☐ Addition		
NAME	SPOTO, CAROLYN		4, 2 NA	ME	c:	larke, John					
STREET ADDRESS	2515 HOLLINGSWORTH HILL		4.3 STR	EET ADORES		321 Braemer Ave	nue				
CITY-ST-ZIP	LAKELAND FL		4.4 CIT	Y-ST-ZIP		keland, FL 33					
TITLE		☐ DELETE	5.1 TITL	E		7		☐ Change	☐ Addition		
NAME			5.2 NAA	ME			•				
STREET ADDRESS			5.3 STR	EET ADDRESS	S						
CITY-ST-ZIP			5.4 C/T	/-ST-ZIP	<u> </u>						
TITLE		☐ DELETE	. 6.1 TITL	E				☐ Change	☐ Addition		
NAME			6.2 NAA	Æ.							
STREET ADDRESS			6.3 STR	EET ADDRESS	s						
CITY-ST-ZIP			6.4 Cm	∕-ST-ZIP				•			

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 of 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 if changed, of an attachment with an address, with all other like empowered.

SIGNATURE: >