


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2007 8:00 am
Secretary of State

06-25-2007 90005 005 ****70.00

DOCUMENT # 739954					
1. Entity Name FIRST PRESBYTERIAN CHURCH OF LAKELAND, FLORIDA, INCORPORATED					
Principal Place of Business FIRST PRESBYTERIAN CHURCH LAKELAND, FL 33801			Mailing Address 175 LAKE HOLLINGSWORTH DRIVE LAKELAND, FL 33801-5697		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		06122007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-0683261	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WILSON, JERRE W 410 HIBRITEN WAY LAKELAND, FL 33803			Name <i>Hunt Berryman</i>		
			Street Address (P.O. Box Number is Not Acceptable) <i>3328 Bridgetield Drive</i>		
			City <i>Lakeland</i> FL Zip Code <i>33803</i>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Hunt Berryman</i>		Signature, typed or printed name of registered agent, and title if applicable.		DATE <i>6-14-07</i>	
Filing Fee is \$81.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	C	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	WATKINS, EUGENIE		NAME	<i>Chair of Session Young, James E.</i>	
STREET ADDRESS	4728 KIMBALL CT. W		STREET ADDRESS	<i>2923 Shoal Creek Village DR.</i>	
CITY-ST-ZIP	LAKELAND, FL 338132453		CITY-ST-ZIP	<i>Lakeland, FL 33803-5403</i>	
TITLE	P.	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SHEPPARD, ALBERT D R		NAME	<i>President Mundy, Craig Allen</i>	
STREET ADDRESS	884 SUMMERFIELD DRIVE		STREET ADDRESS	<i>3314 Summerland Hills Loop</i>	
CITY-ST-ZIP	LAKELAND, FL 338031896		CITY-ST-ZIP	<i>Lakeland, FL 33812-6352</i>	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BAKER, THOMAS		NAME	<i>Treasurer Dennis, Terry</i>	
STREET ADDRESS	845 MISSISSIPPI AVE		STREET ADDRESS	<i>307 Prado Place</i>	
CITY-ST-ZIP	LAKELAND, FL 33801		CITY-ST-ZIP	<i>Lakeland, FL 33803-3952</i>	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LOUDON, JOHN B		NAME		
STREET ADDRESS	5604 WOODWIND HILLS DR		STREET ADDRESS		
CITY-ST-ZIP	LAKELAND, FL 33813		CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DENNIS, TERRY MR		NAME	<i>Vice President Frost, John W II</i>	
STREET ADDRESS	307 PRADO PLACE		STREET ADDRESS	<i>2061 EF Griffin Road</i>	
CITY-ST-ZIP	LAKELAND, FL 338033952		CITY-ST-ZIP	<i>Bartow, FL 33830-9730</i>	
TITLE	AT	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FETHERMAN, CRAIG A MR		NAME	<i>Baker, Thomas</i>	
STREET ADDRESS	1744 ROSSHINE COURT		STREET ADDRESS	<i>1911 Pawnee Trl</i>	
CITY-ST-ZIP	LAKELAND, FL 338132342		CITY-ST-ZIP	<i>Lakeland, FL 33803-2173</i>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>V. Jerry Dennis</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE <i>6/17/07</i> DAYTIME PHONE # <i>867-680-4644</i>	