

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

1995 5-1-95

B-7089 CORPORATION KC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 1:05

DOCUMENT # 748807 (5)

1. Corporation Name
PLANTATION PRESBYTERIAN CHURCH, U.S.A., INCORPORATED.

Principal Place of Business Mailing Address
901 N.W. 70TH AVENUE 901 N.W. 70TH AVENUE
PLANTATION FL 33317 PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/05/1979 3a. Date of Last Report 08/05/1994

4. FEI Number 59-1356063 Applied For Not Applicable

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. Zip Country 29. Zip Country 30. Zip Country

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

FRANZ, CARL H
901 N.W. 70TH AVENUE
PLANTATION FL 33317

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE PT
NAME LEWIS, WILLIAM
STREET ADDRESS 901 N W 70TH AVE
CITY-ST-ZIP PLANTATION, FL 00000

TITLE TT
NAME ~~UNRUH, JIM~~ JAMES R. WIEGLEY
STREET ADDRESS ~~4801 N.W. 7TH DR.~~ 1741 N W 11 TH ST
CITY-ST-ZIP FT. LAUDERDALE FL PLANTATION, FL 33324

TITLE T
NAME ANDERSON, FRED
STREET ADDRESS 7401 KIMBEALY BLYD APT 201
CITY-ST-ZIP N. FT. LAUDERDALE, FL 33068

TITLE T
NAME RUSSELL, DAN
STREET ADDRESS 10091 NW 7th St
CITY-ST-ZIP PLANTATION, FL 33324

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

RECORDED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, if changed, or on an attachment with an address.

SIGNATURE: *James R. Wiegley* 4/23/95 305 587 0830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER AS OFFICER OR DIRECTOR (Last) (Daytime Phone #)
JAMES R. WIEGLEY - TREASURER