

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 20, 2007 8:00 am**  
**Secretary of State**

02-20-2007 90060 016 \*\*\*\*61.25



**DOCUMENT # 762017**

1. Entity Name

**THE FIRST PRESBYTERIAN CHURCH OF HIGH SPRINGS, INC.**

Principal Place of Business

Mailing Address

205 NE 2ND AVE  
 HIGH SPRGS FL 32655  
 US

P.O. BOX 1448  
 HIGH SPRGS. FL 32655  
 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE CR2E037 (10/06)

4. FEI Number

59-1997394

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLANTON, EDNA  
 610 NW 3RD AVE  
 HIGH SPRGS FL 32655

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

*Edna Blanton*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
D	SCHAFFER, DAVID	14717 NW 103RD TERR	ALACHUA FL 32615	<input type="checkbox"/>
D	ANDERSON, LETITIA	7704 NW 179TH ST	ALACHUA FL 32615	<input type="checkbox"/>
DS	BLANTON, EDNA	610 NW 3RD AVENUE	HIGH SPRINGS FL 32643	<input type="checkbox"/>
DT	GRUNDER, GARY	P O BOX 727	HIGH SPRINGS FL 32655	<input checked="" type="checkbox"/>
D	HALL, CLIFFORD	P.O. BOX 1098	HIGH SPRINGS FL 32655	<input type="checkbox"/>
D	KREINBIHL, JOANNE	2659 NW 25TH AVE	BELL FL 32619	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	Michael Smith	P.O. Box 1488	HIGH SPRINGS, FL 32655	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Mary Russell	P.O. Box 1488	HIGH SPRINGS, FL 32655	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Bart Waters	P.O. Box 1488	HIGH SPRINGS, FL 32655	<input type="checkbox"/>	<input type="checkbox"/>
DT	Grunder, Patricia	P.O. Box 727	HIGH SPRINGS, FL 32655	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Wolfe, Thomas	P.O. Box 1488	HIGH SPRINGS, FL 32655	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Edna Blanton*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #