2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762017

FILED Mar 28, 2008 Secretary of State

Entity Name: THE FIRST PRESBYTERIAN CHURCH OF HIGH SPRINGS, INC.

Current Principal Place of Business:				New Principal Place of Business:			
205 NE 2NI HIGH SPRO	D AVE GS, FL 32655	US					
Current Mailing Address:				New Mailing Address:			
P.O. BOX 1 HIGH SPRO	448 GS., FL 32655	US					
FEI Number: 59-1997394 FEI Number Applied For () FEI Nu			FEI Numb	Imber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
BLANTON, EDNA 610 NW 3RD AVE HIGH SPRGS, FL 32655 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,							
in the State		abilities and elaceritein for the p		gg		omeo or regional a	goni, or boin,
SIGNATUR							
Electronic Signature of Registered Agent						Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () I SCHAFER, DAVI 14717 NW 103R ALACHUA, FL 3	D TERR	۱ م	Fitle: Name: Address: Dity-St-Zip:	D (X WATER, BAR 7704 NW 179 ALACHUA, FL	TH ST	
Title: Name: Address: City-St-Zip:	D () I ANDERSON, LE ⁻ 7704 NW 179TH ALACHUA, FL 33	ST	۱ م	Fitle: Name: Address: Dity-St-Zip:	D (2 WATERS, LET 7704 NW 179 ALACHUA, FL	TH ST	
Title: Name: Address: City-St-Zip:	DS () I BLANTON, EDNA 610 NW 3RD AV HIGH SPRINGS,	ENUE	۱ م	Fitle: Name: Address: Dity-St-Zip:	DS (X BLANTON, EE 610 NW 3RD HIGH SPRING	AVENUE	
Title: Name: Address: City-St-Zip:	DT () I GRUNDER, PATI P O BOX 727 HIGH SPRINGS,		۸ م	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I HALL, CLIFFORI P.O. BOX 1098 HIGH SPRINGS,		۸ م	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I WOLFE, THOMA PO BOX 1488 HIGH SPRINGS,		۸ م	Fitle: Name: Address: City-St-Zip:	() Change () Addition	

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: PATRICIA GRUNDER T 03/28/2008