

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004 8:00 am
Secretary of State

07-06-2004 90114 028 ****61.25

DOCUMENT # 763993

1. Entity Name
THE FIRST PRESBYTERIAN CHURCH OF NAPLES



Principal Place of Business
**250 SIXTH ST. SOUTH
NAPLES, FL 33940-6120**

Mailing Address
**250 SIXTH ST. SOUTH
NAPLES, FL 33940-6120**

44047023



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

07012004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-6045875

Applied For
Not Applicable

Zip
34102-6186

Country

Zip
34102-6186

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WILSON, GARY K
5801 PELICAN BAY BLVD.
NAPLES, FL 34108-2709**

7. Name and Address of New Registered Agent

Name **McCullough, Thomas R.**

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

7021 Rue De Marquis

City **Naples**

FL Zip Code **34108**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TDT
RHEIN, MARK
7522 CORDOBA CIRCLE
NAPLES, FL 341097116** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
WYKER, JACK
7575 PELICAN BAY BLVD., APT. 907
NAPLES, FL 341088534** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
Alexander, Scott
1516 Gormican Ln
Naples, FL 34110** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
MC CULLOUGH, THOMAS R
7021 RUE DE MARQUIS
NAPLES, FL 341080000** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SDT
STEWART, JAMES
157 1ST AVE., NORTH
NAPLES, FL 341025902** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES E. STEWART

7/2/04

Date

239-649-8525

Daytime Phone #