2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769951

FILED Apr 18, 2007 Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH OF DADE CITY, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

37412 CHURCH AVE DADE CITY, FL US

Current Mailing Address: New Mailing Address:

P O BOX 1243

DADE CITY, FL US

FEI Number: 59-6045460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORRIS, KEVIN
37950 E PALM AVENUE
DADE CITY, FL 33525 US
MORRIS, KEVIN
14432 WILLOW RUN ROAD
DADE CITY, FL 33523 US

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.

SIGNATURE: 04/18/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 GRIMES, SANDI
 Name:
 LARUE, TODD

 Address:
 10600 FORT KING RD
 Address:
 34343 MISSION VALLEY DRIVE

City-St-Zip: DADE CITY, FL 33525 City-St-Zip: DADE CITY, FL 33525

Title: VPD () Delete Title: VPD (X) Change () Addition Name: CARROLL, JACKIE Name: GRIMES, SANDI

 Address:
 11740 ELKINS RD.
 Address:
 10600 FORT KING ROAD

 City-St-Zip:
 DADE CITY, FL 33525
 City-St-Zip:
 DADE CITY, FL 33525

 $\label{eq:title:Title:RSD} \textit{Title:} \qquad \textit{RSD} \qquad \textit{(X) Change () Addition}$

Name:HEDLUND, RICHARDName:DOROTZAK, PATAddress:29413 ZELLER AVE.Address:13115 SOUTH VILLAGE ROAD

City-St-Zip: SAN ANTONIO, FL 33576 City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the 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: TODD LARUE PD 04/18/2007