

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771118

FILED
Mar 07, 2008
Secretary of State

Entity Name: THE FOUNDATION FOR THE CHURCH OF THE PALMS - PRESBYTERIAN (U.S.A.), INC.

Current Principal Place of Business:

3224 BEE RIDGE ROAD
SARASOTA, FL 34243 US

New Principal Place of Business:

Current Mailing Address:

3224 BEE RIDGE ROAD
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 59-2434393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GETZEN, LINDA R
200 S ORANGE AVENUE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLLINS, SCOTT
Address: 4623 TRAILS DR
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: MILLER, BRIAN Y
Address: 3224 BEE RIDGE ROAD
City-St-Zip: SARASOTA, FL 34233

Title: TRES () Delete
Name: JOHNS, KENNETH M III
Address: 2217 SHADOW WOOD LANE
City-St-Zip: SARASOTA, FL 34240

Title: SD () Delete
Name: THOMASON, ELIZABETH L
Address: 3224 BEE RIDGE ROAD
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILSON, BRAD PRESIDE
Address: 4623 TRAILS DR
City-St-Zip: SARASOTA, FL 34232

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KENNETH M JOHNS III

TRES

03/07/2008

Electronic Signature of Signing Officer or Director

Date