

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 24, 2009
Secretary of State**

DOCUMENT# N08000008418

Entity Name: FIRST PRESBYTERIAN CHURCH OF QUINCY, INC.

Current Principal Place of Business:

306 N. MADISON STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

306 N. MADISON STREET
QUINCY, FL 32351

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HINSON, ALEXANDER L
121 N. MADISON STREET
QUINCY, FL 32351 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: D () Delete
Name: BOHANNON, HUBERT
Address: 110 GREENWAY DR.
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: CURRY, JOHN S
Address: 221 NORTH STREET
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: DOONER, MICHAEL
Address: 414 W. LIVE OAK LANE
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: HACKNEY, GEORGE
Address: 1020 DOGWOOD DRIVE
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: HINSON, ALEXANDER L
Address: 1350 ATTAPULGUS HWY
City-St-Zip: QUINCY, FL 32352

Title: D () Delete
Name: HINSON, ANGUS T
Address: 716 N. 9TH STREET
City-St-Zip: QUINCY, FL 32351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WOODWARD, PAT
Address: 789 ATTAPULGUS HWY.
City-St-Zip: QUINCY, FL 32352

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

Title: D (X) Change () Addition
Name: HINSON, JANE
Address: 1350 ATTAPULGUS HWY
City-St-Zip: QUINCY, FL 32352

Title: D (X) Change () Addition
Name: SUMMERFORD, DALE
Address: 320 FOREST DR.
City-St-Zip: QUINCY, FL 32351

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: PAT WOODWARD

D

06/24/2009

Electronic Signature of Signing Officer or Director

Date