

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 27, 2009  
Secretary of State**

DOCUMENT# N26968

Entity Name: PINECREST PRESBYTERIAN CHURCH OF MIAMI, INC.

**Current Principal Place of Business:**

10400 SW 57 AVE  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

10400 SW 57 AVE  
MIAMI, FL 33156

**New Mailing Address:**

FEI Number: 59-6045900      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LONES, JOHN RUDGE  
10531 SW 207 ST  
CUTLER BAY, FL 33189      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: LONG, MAXINE  
Address: 1808 FERDINAND ST  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD      ( ) Delete  
Name: LONES, NANCY  
Address: 10531 SW 207 STREET  
City-St-Zip: CUTLER BAY, FL 33189

Title: TD      ( ) Delete  
Name: LONES, JOHN RUDGE  
Address: 10531 SW 207TH STREET  
City-St-Zip: CUTLER BAY, FL 33189

Title: VD      ( ) Delete  
Name: SCHMIDT, CHRISTINE  
Address: 9420 SW 215 LANE  
City-St-Zip: CUTLER BAY, FL 33189

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JOHN RUDGE LONES

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TREA

03/27/2009

\_\_\_\_\_  
Date