2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# N42187

Entity Name: COMMUNITY PRESBYTERIAN CHURCH OF NORTH MARION, INC.

Current Principal Place of Business:

20098 N. HWY 441
MC INTOSH, FL 32664 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 616
MC INTOSH, FL 32664 US

New Mailing Address:

FEI Number: 59-3050328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKUP, HOWARD
5900 AVE H
MCINTOSH, FL 32664 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:	DP	( ) Delete
Name:	CLEVERLAND, MARY	
Address:	P.O. BOX 646	
City-St-Zip:	MICANOPY, FL 32667	
Title:	DV	( ) Delete
Name:	LAWSON, ART	
Address:	2411 SW 7TH AVE	
City-St-Zip:	OCALA, FL 34474	
Title:	DS	( ) Delete
Name:	NEWBORN, LEE	
Address:	21100 NW 72ND CT	
City-St-Zip:	MICANOPY, FL 32667	
Title:	DT	( ) Delete
Name:	WALKUP, HOWARD K.,	
Address:	5900 AVE. H	
City-St-Zip:	MCINTOSH, FL	
Title:	D	( ) Delete
Name:	WALKUP, J. B., JR.,	
Address:	20490 US HWY 441	
City-St-Zip:	MCINTOSH, FL	

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:		
Title:	D	(X) Change ( ) Addition
Name:	FLOYD MCHENRY,	
Address:	2415 NW 165TH STREET	
City-St-Zip:	CITRA, FL 32113	

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: HOWARD K WALKUP DT 02/25/2009

Electronic Signature of Signing Officer or Director — Date