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Mar 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N42585** (2)
1. Corporation Name
THE FIRST PRESBYTERIAN CHURCH OF MOUNT DORA

Principal Place of Business P O BOX 934 MOUNT DORA FL 32757	Mailing Address P O BOX 934 MOUNT DORA FL 32757-0934
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3. Date Incorporated or Qualified 03/14/1991	3a. Date of Last Report 02/12/1996
4. FEI Number 59-0940288	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRADLEY, ROBERT J.
3455 LAKESHORE DRIVE
MOUNT DORA FL 32757**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City FL	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	TR ☒ DELETE
NAME	LEE, LESLIE
STREET ADDRESS	473 BURNT TREE LANE
CITY-ST-ZIP	APOPKA FL
TITLE	TR ☐ DELETE
NAME	WOOTTON, JAMES , Trustee
STREET ADDRESS	6362 JDORA DRIVE
CITY-ST-ZIP	MOUNT DORA FL
TITLE	TR ☐ DELETE
NAME	CRANEY, GARY Trustee
STREET ADDRESS	1480 E. THIRD AVENUE
CITY-ST-ZIP	MOUNT DORA FL
TITLE	D ☒ DELETE
NAME	CASEY, BILL
STREET ADDRESS	2559 PALMETTO RD.
CITY-ST-ZIP	MT DORA FL 32757
TITLE	DS ☐ DELETE
NAME	LEAVENWORTH, ELIZABETH , Clerk Session
STREET ADDRESS	602 CHAUTAUGUA DRIVE
CITY-ST-ZIP	MT. DORA FL
TITLE	DT ☐ DELETE
NAME	BRADLEY, ROBERT J. , Treasurer
STREET ADDRESS	3455 LAKESHORE DR.
CITY-ST-ZIP	MOUNT DORA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Frank Scott, Trustee
1.3 STREET ADDRESS	4705 Sloewood Drive
1.4 CITY-ST-ZIP	Mt. Dora, FL 32757
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Harry Jacobson, Elder
4.3 STREET ADDRESS	2728 Lake Landing Blvd.
4.4 CITY-ST-ZIP	Eustis, FL 32726
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	700002118357
6.3 STREET ADDRESS	-03/19/97--01109--013
6.4 CITY-ST-ZIP	***61.25

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED *Robert D. Bradley*

3/13/97

CR2E037 (9/96)