

FILE NOW: FILING FEE IS \$61.25

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90004 041 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N44930

1. Corporation Name
RIVER OAKS PRESBYTERIAN CHURCH, INC.

Principal Place of Business P O BOX 950340 LAKE MARY FL 32795	Mailing Address P O BOX 950340 LAKE MARY FL 32795
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2. Principal Place of Business 21 405 WASHINGTON AVE	2a. Mailing Address 26 S/A	3. Date Incorporated or Qualified 08/30/1991
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-3062688
23 City & State LAKE MARY, FL	28 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24 Zip 32746	25 Country USA	29 Zip
30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent HATCHER, STEPHEN B. C/O ZIMMERMAN, SHUFFIELD, KISER, ET AL 315 E. ROBINSON STREET, SUITE 600 ORLANDO FL 32801	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONTGOMERY, JOHN	1.2 NAME	
STREET ADDRESS	101 QUAIL RUN CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PICKENS, TOM	2.2 NAME	DALE PULLIS
STREET ADDRESS	221 PORTSMOUTH COVE	2.3 STREET ADDRESS	512 WOODSTEAD CT.
CITY-ST-ZIP	LONGWOOD FL	2.4 CITY-ST-ZIP	LONGWOOD, FL 32779
TITLE	S <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEST, GAIL	3.2 NAME	
STREET ADDRESS	5372 LAKE BLUFF TERR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE FOREST FL	3.4 CITY-ST-ZIP	
TITLE	ED <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEONHARD, JIM	4.2 NAME	
STREET ADDRESS	718 BAYWOOD CIR	4.3 STREET ADDRESS	
CITY-ST-ZIP	SANFORD FL	4.4 CITY-ST-ZIP	
TITLE	ED <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAMBERLAIN, BOB	5.2 NAME	
STREET ADDRESS	938 SHRIVER CIR	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL	5.4 CITY-ST-ZIP	
TITLE	ED <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEST, WALLACE	6.2 NAME	
STREET ADDRESS	5372 LAKE BLUFF TERR	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE FOREST FL	6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: _____ DATE: **11/27/99** DAYTIME PHONE #: **407 330 9103**

CR2E037 (1/98)