

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90086 006 ****61.25

DOCUMENT # N51068

1. Entity Name

**THE FIRST PRESBYTERIAN CHURCH OF DAYTONA BEACH,
FLORIDA**

Principal Place of Business

Mailing Address

**620 SOUTH GRANDVIEW AVENUE
DAYTONA BEACH FL 32118**

**620 SOUTH GRANDVIEW AVENUE
DAYTONA BEACH FL 32118**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0704731

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PALMETTO CHARTER SERVICES
150 MAGNOLIA AVENUE
DAYTONA BEACH FL 32114**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
NAME **MD**
STREET ADDRESS **BOND WALKER, LAURA**
CITY-ST-ZIP **1935 S PENINSULA DR
DAYTONA BEACH FL 32118**

TITLE ☐ Change ☒ Addition
NAME **P/D**
STREET ADDRESS **Gard, Nancy**
CITY-ST-ZIP **245 Seaview Avenue
Daytona Beach, FL 32118-3426**

TITLE ☒ Delete
NAME **SD**
STREET ADDRESS **SCHLAGETER, DEBORAH**
CITY-ST-ZIP **4100 QUAIL RANCH RD
NEW SMYRNA BEACH FL 32168**

TITLE ☐ Change ☒ Addition
NAME **S/D**
STREET ADDRESS **Blankinship, William**
CITY-ST-ZIP **1791 Taylor Road
Daytona Beach, FL 32124-6842**

TITLE ☒ Delete
NAME **DT**
STREET ADDRESS **HOOVER, H. L.**
CITY-ST-ZIP **904 SEA DUCK DRIVE
DAYTONA BEACH FL 32119-2378**

TITLE ☐ Change ☐ Addition
NAME **D**
STREET ADDRESS **Remark, Tracey**
CITY-ST-ZIP **815 N. Oleander Avenue
Daytona Beach, FL 32118-3722**

TITLE ☐ Delete
NAME **VMD**
STREET ADDRESS **REMARK, TRACEY**
CITY-ST-ZIP **815 N OLEANDER AVE
DAYTONA BEACH FL 32118**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

CR2E037 (9/01)