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Mar 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N92000000822 (8)**

1. Corporation Name

COCOA PRESBYTERIAN CHURCH, INC.

Principal Place of Business

Mailing Address

**1404 DIXON BLVD
COCOA FL 32922**

**1404 DIXON BLVD
COCOA FL 32922**

3. Date Incorporated or Qualified

05/14/1959

4. FEI Number

59-1009918

Applied For

Not Applicable

2. Principal Place of Business

21 ABOVE

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

Brevard

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**PHILIPS, CHARLES R
1404 DIXON BLVD
COCOA FL 32922**

10. Name and Address of New Registered Agent

81 Name ALICE S. BROWN, PRESIDENT OF TRUSTEES
82 Street Address (P.O. Box Number is Not Acceptable)
2801 SLIPPERY ROCK DR
83 COCOA, FLORIDA 32926-5744
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 *Alice S. Brown*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

March 16, 1998

12. OFFICERS AND DIRECTORS

TITLE **TR** ☐ DELETE
NAME **SHEPARD, WAYNE**
STREET ADDRESS **1411 SO. ROCKLEDGE**
CITY-ST-ZIP **COCOA FL**

TITLE **TR** ☐ DELETE
NAME **GREENE, PAUL**
STREET ADDRESS **3743 N INDIAN RIVER DR**
CITY-ST-ZIP **COCOA FL**

TITLE **TR** ☐ DELETE
NAME **BROWN, ALICE S**
STREET ADDRESS **2801 SLIPPERY ROCK DR**
CITY-ST-ZIP **COCOA FL**

TITLE **TR** ☒ DELETE
NAME **WEST, W C**
STREET ADDRESS **112 BOUGANVILLEA DR**
CITY-ST-ZIP **ROCKLEDGE FL**

TITLE **CTR** ☒ DELETE
NAME **CROSSWHITE, CLYDE**
STREET ADDRESS **1200 S COURTEYAY PKWY #1104**
CITY-ST-ZIP **MERRITT ISLAND FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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 **CTR**
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME **ERMA P. Hise, ALTERNATE ***
4.3 STREET ADDRESS **1117 WEST HIGHLAND DR.**
4.4 CITY-ST-ZIP **COCOA, FL 32922**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME **TR**
5.3 STREET ADDRESS **KENNETH BOWERS**
5.4 CITY-ST-ZIP **1108 WEST HIGHLAND DR.**
COCOA, FL. 32922

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE: *Alice S. Brown*

16 March 1998

CR25037 (10/97)

Cocoa Presbyterian Church
Expenditure Authorization

Call 632-8960
Cy T. Russell
R. J. ...

Requester: BROWN, ALICE S.

Date: 15 January 1998

Account #: 5321
(See other side for list of Accounts)

Payee: DEPARTMENT OF STATE

Amount: \$ 61.25

Check is to be left in office or
mailed to address indicated below

Type of Expense: (Please check one)

Mail in enclosed envelope

☒ One Time

☐ Recurring: Indicate Frequency Below

Reason for Expenditure: (Attach Receipts or Charge Slips)
See Authorization Guidelines for approval levels.

NONPROFIT CORPORATION ANNUAL REPORT

Roy Lealman Jr
Alice A. Brown, President of Trustees

Fund Manager Approval: _____

Fund Managers				
Fund/Area	Primary		Secondary	
Admin	Lou DeSalvo	636-2463	Ed Cordell	632-8960
Church Athletics	Dale Pierce	632-6648	David Griffith	636-5978
Diakonia Fund	Charles Philips	636-9602	Pat Caddell	636-7131
Evangelism	Rusty Branch	632-2499	Bill Riddle	632-6545
Fellowship & Outreach	Beth Timmons	636-9265		
Finance/Budget	Richard Scoles	264-9364		
House & Building	Joe Wagner	636-2843		
Kitchen Supplies	Joanne Meeker	632-5979		
Memorial Committee	Larry Smith	636-0248	Ed Cordell	632-8960
Missions	Chuck Gould	632-6526	Vern Denkhous	636-9773
Stewardship	Carol Carmichael	636-8477	Rusty Branch	632-2499
Office Supplies	Laurie King	636-9602	Lou DeSalvo	636-2463
Presbyterian Women	Jane Sizemore	632-5470		
Roads & Grounds	Roy Lealman, III	636-3521		
Service, 2 Cents A Meal	Jim Dillingham	632-6693	Helen Ward	
Sunday School, Christian Education	Mike Lawhon	639-0867	Bill Riddle	632-6545
Worship includes Choir, Music, Organ	Helen Ward	631-0589	Chuck Gould	632-6526
Youth	Mark Pardue	636-5154 638-4274	Mike Lawhon	639-0867

Any Questions, please call:

Disbursing Treasures: JoAnne Huffman - 631-1976 or Lois Russell - 632-4161 or Admin/Finance

For Office Use Only:

Date Paid: _____ Check No: _____ Payee: _____

Revised: 2/8/97