2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# N32756

Entity Name: THE FIRST PRESBYTERIAN CHURCH OF LAKE PLACID, FLORIDA ASSOCIATE REFORMED SYNOD, INC.

Current Principal Place of Business:

117 NORTH OAK STREET
P O BOX 326
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

117 NORTH OAK STREET
P O BOX 326
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 59-2956007 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, BERT J., III
401 DAL HALL BOULEVARD
LAKE PLACID, FL 33852 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: T ( ) Delete
Name: TOMPKINS, JAMES
Address: 255 E PARK
City-St-Zip: LAKE PLACID, FL 33852

Title: VCT ( ) Delete
Name: ELLIOTT, PAUL
Address: 119 SIRENA WAY
City-St-Zip: LAKE PLACID, FL 33852

Title: ST ( ) Delete
Name: BREIG, DOLLY
Address: 102 COUNTRY CLUB DR
City-St-Zip: LAKE PLACID, FL 33852

Title: T ( ) Delete
Name: SCHENCK, LOIS
Address: 101 LAKEFRONT COURT NE
City-St-Zip: LAKE PLACID, FL 33852

Title: T ( ) Delete
Name: WHITE, ROBERT
Address: 24 LAKE JUNE RD
City-St-Zip: LAKE PLACID, FL 33852

Title: T ( ) Delete
Name: BUCK, BENNY
Address: 1736 SECOND STREET
City-St-Zip: LAKE PLACID, FL 33852

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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL ELLIOTT VCT 04/27/2005

Electronic Signature of Signing Officer or Director — Date