

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32756

FILED
Apr 16, 2009
Secretary of State

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:

117 NORTH OAK AVE
LAKE PLACID, FL 33852

Current Mailing Address:

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

New Mailing Address:

118 NORTH OAK AVE
LAKE PLACID, FL 33852

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 E
Address: 225 E. PARK AVENUE
City-St-Zip: LAKE PLACID, FL 33852

Title: T () Delete
Name: WILLIAMS, FRANK
Address: 1541 SPRING LANE
City-St-Zip: LAKE PLACID, FL 33852

Title: T () Delete
Name: GREEN, DANNY
Address: 573 SUNSET POINT DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: T () Delete
Name: LABLANC, KEN
Address: 599 SUNSET POINT DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: T () Delete
Name: BATES, DON
Address: 81 BATES RD
City-St-Zip: LAKE PLACID, FL 33852

Title: TS () Delete
Name: SNIVELY, JEANNIE
Address: 244 HUNTLEY OAKS BLVD
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WHEELER, DAVID
Address: 441 LAKE MIRROR DR
City-St-Zip: LAKE PLACID, FL 33852

Title: T (X) Change () Addition
Name: VELEY, HUGH
Address: 331 LAKE MIRROR DR
City-St-Zip: LAKE PLACID, FL 33852

Title: T (X) Change () Addition
Name: GREEN, DANNY
Address: 175 ALDERMAN AVE
City-St-Zip: LAKE PLACID, FL 33852

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

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

Title: TS (X) Change () Addition
Name: CLINARD, JAMES
Address: 106 MAR-BET DR
City-St-Zip: LAKE PLACID, FL 33852

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID WHEELER

T

04/16/2009

Electronic Signature of Signing Officer or Director

Date