#### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 762017** 

Entity Name: THE FIRST PRESBYTERIAN CHURCH OF HIGH SPRINGS, INC.

FILED
Mar 01, 2023
Secretary of State
1409700710CC

## **Current Principal Place of Business:**

18711 HIGH SPRINGS MAIN ST. HIGH SPRINGS, FL 32643

### **Current Mailing Address:**

P.O. BOX 1448

HIGH SPRINGS. FL 32655 US

FEI Number: 59-1997394 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

ROBINSON, JEAN 18024 NW CR 235A ALACHUA, FL 32615 US

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: JEAN ROBINSON 03/01/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

THE TREASURER THE DIRECTOR, I RESIDENT, SECRETA	Title TR	REASURER	Title	DIRECTOR, PRESIDENT, SECRETA
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NameBUCK, PATRICIA JNameROBINSON, JEANAddress18707 NW 202 ST.Address18024 NW CR 235ACity-State-Zip:HIGH SPRINGS FL 32643City-State-Zip:ALACHUA FL 32615

Title DIRECTOR Title DIRECTOR

Name RADDER, DAVE Name STOLL, WILLIAM

Address 298 SE ROBINHOOD PL Address 20030 NW 249TH ST.

City-State-Zip: HIGH SPRINGS FL 32643 City-State-Zip: HIGH SPRINGS FL 32643

Title DIRECTOR Title DIRECTOR

Name ADAMS-WATERS, LETITIA Name PERFETTO, GUS
Address 7704 NW 179TH ST. Address 4900 NE 58TH LANE

City-State-Zip: ALACHUA FL 32615 City-State-Zip: HIGH SPRINGS FL 32643

Title DIRECTOR Title DIRECTOR

Name WATERS, JAMES BRETT Name KISLING, VERNON

Address PO BOX 725 Address PO BOX 1511

City-State-Zip: HIGH SPRINGS FL 32655 City-State-Zip: HIGH SPRINGS FL 32655

#### Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA J. BUCK TREASURER 03/01/2023

# Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameWOLFE, MYRNANameBARNET, ANN

Address 22744 NW 191ST LANE Address 16368 NW 257TH DR

City-State-Zip: HIGH SPRINGS FL 32643 City-State-Zip: HIGH SPRINGS FL 32643