FILE NOW: FILING FEE IS \$61.25

NONPROFIT FLORIDA DEPARTMENT OF STATE Feb 27 1998 8:00am CORPORATION Sandra B. Moltham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)700290 FIRST PRESBYTERIAN CHURCH OF TALLAHASSEE, INC. Mailing Address Principal Place of Business 110 N ADAMS ST 102 N. ADAMS ST. TALLAHASSEE FL 32301-7777 TALLAHASSEE INC 3. Date Incorporated or Qualified 102 N. ADAMS ST. TALLAHASSEE FL 32301-7718 12/18/1959 4. FEI Number Applied For 59-0651083 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired Fee Required 26 21 Suite, Apt. #, etc. \$5.00 May Be Suite, Apt. #, etc. 6. Election Campaign Financing Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ No ☐ Yes 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip Country Yes Personal Property Tax due June 30. 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Stakenas POTTER, THOMAS K. JR Street Address (P.O. Box Number Is Not Acceptable) 82 3069 ECHO POINT LANE are 83 TALLAHASSEE FL 32310 Zip Code 84 lallahassee 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 obtigations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE 2/15/98 DATE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1.1 TITLE TITLE Lowell Clary CROWELL, PETER NAME 1.2 NAME 2106 Olivia Brive 2905 BRANDEMERE 1.3 STREET ADDRESS STREET ADDRESS Tallahassee FL 32308 TALLAHASSEE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change **X** Addition 2.1 TITLE TR TITLE Norma M. Meier **BLOUNT, BEBE** 2.2 NAME NAME 908 waverly Road 6726 CHEVVY WAY 2.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL Tailahassee. 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition PTR 3.1 TITLE TITLE Hoyt Folker 2123 Atchena Nene POTTER, THOMAS K JR 3.2 NAME NAME 3069 ECHO POINT LANE 3.3 STREET ADDRESS STREET ADDRESS Tallahassee, FL 32301 TALLAHASSEE FL 3.4 CITY-ST-7IP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE Dorothy A. Rose 1310 Golf Terrace KICKLITER, RAY 4. 2 NAME NAME **821 CHERRY** 4.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL Tailahassee, FL 32301 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE. 5.1 TITLE stakenas Robert G. 2334 Clave Dr. STAKENAS, ROBERT 🕏 5.2 NAME NAME 2334 CLARE DR 5.3 STREET ADDRESS STREET ADDRESS Tallahassee Fl Tallahassee FL 32308 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE TITLE Robert 5. Hightower BENTLEY, MARTHA 6.2 NAME NAME 1340 Peace-field 2415 SAN PEDRO 6.3 STREET ADDRESS STREET ADDRESS 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.

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1/25/98

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