

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702013

1. Entity Name

FIRST PRESBYTERIAN CHURCH OF DELRAY BEACH, FLORI

Principal Place of Business

33 GLEASON STREET
DELRAY BEACH FL 33483

Mailing Address

33 GLEASON STREET
DELRAY BEACH FLA 33483-6925

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0830740

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NOEL SMITH
21337 TOWN LAKE DRIVE
BOCA RATON FL 33486

Name

Robert C. Moss

Street Address (P.O. Box Number is Not Acceptable)

3952 Green Forest Drive

City

Boynton Beach

FL

Zip Code

33436

8. 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

Robert C. Moss

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D SOPP, ALBERT L.	☒ Delete
STREET ADDRESS	2255 LINDELL BLVD. #4102	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE NAME	TD BARTHOLOMEW, A. P., JR.	☐ Delete
STREET ADDRESS	6665 N. OCEAN BLVD.	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	
TITLE NAME	P LARRY, R. HEATH	☐ Delete
STREET ADDRESS	4333 N OCEAN BLVD, #A-3	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE NAME	DS MOSS, ROBERT C	☐ Delete
STREET ADDRESS	3952 GREEN FOREST DR	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE NAME	D TANNER, ROBERT L	☐ Delete
STREET ADDRESS	103 ORCHARD RIDGE LANE	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE NAME	D DUANE, J. MARSHALL	☒ Delete
STREET ADDRESS	1095 HIBISCUS LANE	
CITY-ST-ZIP	DELRAY BEACH FL 33444	

TITLE NAME	Director	☐ Change ☒ Addition
STREET ADDRESS	Jerry K. Barding	
CITY-ST-ZIP	711 SE 3rd Street Delray Beach, FL 33483	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	Director	☒ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	Director	☐ Change ☒ Addition
STREET ADDRESS	Dr. James Fisher	
CITY-ST-ZIP	3619 SW 23rd Street Delray Beach, FL 33445	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *A. P. Bartholomew, Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-276-6338

Date

Daytime Phone #

CR2E037 (9/99)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90058 018 ****61.25



DO NOT WRITE IN THIS SPACE