

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702218

FILED
Mar 23, 2007
Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH OF TEQUESTA, INC.

Current Principal Place of Business:

482 TEQUESTA DR.
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

482 TEQUESTA DR.
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 59-1237866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERSEY, DONALD D
482 TEQUESTA DRIVE
TEQUESTA, FL 33469 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: PD () Delete
Name: REIBEL, DON
Address: 482 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: VD () Delete
Name: MAYER, GENE
Address: 482 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

Title: SD () Delete
Name: MOTE, MARILYN
Address: 482 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: TD () Delete
Name: REID, JACK
Address: 482 TEQUESTA DR.
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCALF, JIM
Address: 482 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: VD (X) Change () Addition
Name: MOTE, JANEL
Address: 482 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

Title: SD (X) Change () Addition
Name: KELLY, LINDA
Address: 482 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: TD (X) Change () Addition
Name: KELLY, LINDA
Address: 482 TEQUESTA DR.
City-St-Zip: TEQUESTA, FL 33469

I hereby certify that the information supplied with this filing does not qualify for the 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: JIM SCALF

PD

03/23/2007

Electronic Signature of Signing Officer or Director

_____ Date