

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703160

FILED
Aug 13, 2009
Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH OF NORTH PORT, FLORIDA

Current Principal Place of Business:

5600 S. BISCAYNE DR.
PO BOX 7107
NORTH PORT, FL 34287

New Principal Place of Business:

5600 S. BISCAYNE DR.
NORTH PORT, FL 34287

Current Mailing Address:

P.O. BOX 7107
NORTH PORT, FL 34287

New Mailing Address:

5600 S. BISCAYNE DR.
NORTH PORT, FL 34287

FEI Number: 59-1680124 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GRUBER, LENNOX
751 BRENDA CT.
PUNTA GORDA, FL 33950 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: GRUBER, LENNOX
Address: 751 BRENDA CT
City-St-Zip: PUNTA GORDA, FL 33950

Title: PD () Delete
Name: GROSS, RALPH
Address: 28200 BERMOUNT RD UNIT 4D
City-St-Zip: PUNTA GORDA, FL 39982

Title: D () Delete
Name: HOUSEHOLDER, JAMES
Address: 8598 GAILLARD AVE.
City-St-Zip: NORTH PORT, FL 34287

Title: SD () Delete
Name: WADE, NUEL E
Address: 516 LOTUS ST
City-St-Zip: PORT CHARLOTTE, FL 33953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LENNOX GRUBER

TD

08/13/2009

Electronic Signature of Signing Officer or Director

_____ Date