FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

703554

(6)

FIRST PRESBYTERIAN CHURCH OF PORT CHARLOTTE, INC

FILED Feb 26 1998 8:00am Secretary of State

•		J. , J			
Principal Place of Business		Malling Address		i ibaiil ibaii daina ilias alia alili ala siali alali b	ANTE BIRGE OFFICE ATRICI
2230 HARIET ST PORT CHARLOTTE FL 33952		2230 HARIET ST PORT CHARLOTTE FL 33952		3. Date Incorporated or Qualified	
				02/05/1962	
				4. FEI Number	Applied For
				59-1835089	Not Applicable
—	lace of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
21 Suite, Apt.	# atc	Suite, Apt. #, etc.		6. Election Campaign Financing	Fee Required \$5.00 May Be
22		27			Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?	
23		28		☐ Yes ☐ No	
Zip	Country	Zip	Country	8. This corporation owes or has paid the curren	· - ·
24	9. Name and Address of Currer		30	Personal Property Tax due June 30	
	g, Raine Biro Accides Di Correi	r vehisteten våett	81 Name		
MAIOED OLEMA				Joseph Baldauf	
2100 KINGS HWY #1051			82 Street A	ddress (P.O. Box Number is Not Acceptable) 2100 Kings Highway #386	
PORT CHARLOTTE FL 33980			83		4
1 0117 0			84 City		Zin Codo
			1 1 1 7 7	Port Charlotte FL	33980
11. Pursuant	to the provisions of Sections 617.050	2 and 617,1508, Florida Statutes	s, the above-named of	corporation submits this statement for the purpose of choration's board of directors. I hereby accept the appoint	anging its registered
agent. I a	im lamitar with, and accept the oblig	ations of Section 617.0503, Flor	ida Statutes.	oration's board or directors. Thereby accept the appoint	Mork as registered
SIGNATURE	Consept It la	Jaldant		4/1/98	
12,	Standard, typed by frinted name of registered age	ont and title If applicable (NOTE: D DIRECTORS	Registered Agent signature :	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change
NAME	KAISER, GLENN		1.2 NAME	Glenn Kaiser	•
STREET ADDRESS	2100 KINGS HWY #1051		1.3 STREET ADDRESS	2100 Kings Highway #105	51
CITY-ST-ZIP	PORT CHARLOTTE FL		1.4 CITY-ST-ZIP	Port Charlotte FL 339	980086
TITLE	Ъ	DELET é	2.1 TITLE	p X3	Change
NAME	BALDAUF, JOSEPH		2.2 NAME	Joseph Baldauf	
STREET ADDRESS	2100 KINGS HWY #386		2.3 STREET ADDRESS	2100 Kings Highway #386	5
CITY-ST-ZIP	PORT CHARLOTTE FL		2. 4 CITY-ST-ZIP	Port Charlotte FL 339	80
TITLE	D	☐ DELETE	3.1 TITLE	Ľ	Change Addition
NAME	PALM, H WENDELL		3.2 NAME		
STREET ADDRESS	22183 MAMARNOECK AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	PORT CHARLOTTE FL	J. J. DELETE	3.4. CITY - ST - ZIP	D	Change XXAddition
TITLE	D THOMBOON BIOMADO	XX DELETE	4.1 TITLE	Carl E Rehm	Outrigo A.Audillon
NAME	THOMPSON, RICHARD 18070 NORTHERN AVENUE		4. 2 NAME	541 Toulouse Drive	
STREET ADDRESS	PORT CHARLOTTE FL		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	FORE CHARLOTTE FL	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME	_	<u> </u>
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	<u> </u>	DELETE	6.1 TITLE		Change
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
APT. AT TIO			CACITY CT 71D		

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.

Parel 181 Respond

2/12/98

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