2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704240

FILED Jan 21, 2009 Secretary of State

Entity Name: NORTH PALM BEACH PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 717 PROSPERITY FARMS ROAD N PALM BEACH, FL 33408 **Current Mailing Address: New Mailing Address:** 717 PROSPERITY FARMS RD. N PALM BEACH, FL 33408 FEI Number: 59-1516451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ELLIOTT, EDWARD L., III 8447 BEÁCONHILL RÓ PALM BEACH GARDENS, FL 33410 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PASCHAL, JACK Name: Name: 413 MARLIN RD Address: Address: City-St-Zip: N. PALM BCH, FL 33408 City-St-Zip: Title: CPD () Delete Title: () Change () Addition HAWKINS, SCOTT G Name: Name: Address: 26 WINDWARD ISLE Address: City-St-Zip: PALM BCH GARDENS, FL 33418 City-St-Zip: Title: () Delete Title: () Change () Addition GINN, SHANNON Name: Name: 106 VIA PARADISIO Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: ELLIOTT, EDWARD L III Name: Address: 8447 BEACONHILL RD Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: () Delete Title: () Change () Addition JOANNA, HOGAN Name: Name: 4632 JUNIPER LANE Address: Address: PALM BEACH GARDENS, FL 33418 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition TALLEY, DAVID Name: Name: Address: 854 FATHOM RD W. Address: NORTH PALM BCH, FL 33408 City-St-Zip: 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: EDWARD L. ELLIOTT III SD 01/21/2009