

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**May 08, 2006 8:00 am**  
**Secretary of State**

05-08-2006 90290 022 \*\*\*\*61.25



**DOCUMENT # 704999**  
1. Entity Name  
**PALMETTO PRESBYTERIAN CHURCH INC**

Principal Place of Business      Mailing Address  
1115 10TH AVE. W.      1115 10TH AVE. W.  
PALMETTO FL 34221-3725      PALMETTO FL 34221-3725



2. Principal Place of Business      3. Mailing Address  
Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

1st MOORE      CR2E037 (10/05)  
4. FEI Number      Applied For  
**05-0007111**      Not Applicable  
5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**  
**EDWARDS, REBECCA**  
**3522 LAKE BAYSHORE DR. K-112**  
**BRADENTON FL 34205**

**7. Name and Address of New Registered Agent**  
Name      **Janet DeGroff**  
Street Address (P.O. Box Number is Not Acceptable)      **2625 TerraCeia Bay Blvd. #206**  
City      **Palmetto**      Zip Code      **FL 34221**

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. I am familiar with, and accept the obligations of registered agent.  
SIGNATURE      *Janet DeGroff*      **04/24/06**  
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**  
**Due By May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	PD	<input type="checkbox"/> Delete
NAME	QUINTANA, ROYCE	
STREET ADDRESS	279 NASSAU DRIVE	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DEGROFF, JANET	
STREET ADDRESS	2943 86TH ST. CIR. E	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GREENLEE, SUSAN	
STREET ADDRESS	4019 LEMONWOOD DR. N.	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	EDWARDS, REBECCA	
STREET ADDRESS	3522 LAKE BAYSHORE DR. K-112	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2625 TerraCeia Bay Blvd. #206	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SD Martha Ferguson	
STREET ADDRESS	2416 Wilderness Blvd. W	
CITY-ST-ZIP	Parrish, FL 34219	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TD Fred Thompson	
STREET ADDRESS	278 Melody Lane	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Roya A Quintana*      **04/24/06 941-722-3513**