## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # 706354**

1. Entity Name

FIRST PRESBYTERIAN CHURCH OF PLANTATION, INC.



Principal Place of Business

12700 W BROWARD BLVD PLANTATION, FL 33325-2308 US Mailing Address

12700 W BROWARD BLVD PLANTATION, FL 33325-2308 US

## FILED Jan 29, 2004 08:00 AM Secretary of State



01222004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-0865845

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WISE, NORM R 6800 NW 27 TERR FT LAUDERDALE, FL 33309

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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						
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financing     Trust Fund Contribution.	g 🗆	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			<u> </u>	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PD WISE, NORM R 6800 NW 27TH TERR FT LAUDERDALE, FL	-		-	01/29704-80093-002 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROBINSON, JIM 9370 NW 31ST PLACE SUNRISE, FL 33351					
TITLE NAME STREET ADDRESS CITY+S1-ZIP	VD ANDERSON, ARCY 5241 SW ST PLANTATION, FL 33317		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY ST ZIP	VD FROST, GORDON 9311 NW 38TH PLACE FT LAUDERDALE, FL		٠	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DOAN, STEVE 7400 NW 16TH STREET PLANTATION, FL 33313					
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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.						

TED NAME OF SIGNING OFFICER OF DIRECTOR