2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706354

FILED Jaņ 1<u>0, 2</u>006 Secretary of State

Entity Name: FIRST PRESBYTERIAN CHURCH OF PLANTATION, INC.

Current Principal Place of Business: New Principal Place of Business: 12700 W BROWARD BLVD PLANTATION, FL 333252308 US **Current Mailing Address: New Mailing Address:** 12700 W BROWARD BLVD PLANTATION, FL 333252308 US FEI Number: 59-0865845 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: WISE, NORM R 12850 W. STATE RD 84 #20-3 DAVIE, FL 33325 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 (X) Change () Addition WISE, NORM R WISE, NORM R Name: Name: 6800 NW 27TH TERR Address: 12850 W ST RD 84 #20-3 Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip: **DAVIE. FL 33325** Title: TD Title: () Delete () Change () Addition ROBINSON, JIM Name: Name: Address: 9370 NW 31ST PLACE Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: VD. () Delete Title: () Change () Addition GRABIS, JOHN Name: Name: 10769 NW 23RD CT Address: Address: City-St-Zip: SUNRISE, FL 33322 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: FROST, GORDON Name: Address: 9311 NW 38TH PLACE Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip: Title: () Delete Title: () Change () Addition DOAN, STEVE Name: Name: 9421 NW 39TH PLACE Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: NORM R WISE PD 01/10/2006