## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708578** 

FILED Apr 10, 2009 Secretary of State

Entity Name: FAITH PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:			New Principal Place of Business:
738 SE S MELROSE	SR 21 E, FL 32666		
Current Mailing Address:			New Mailing Address:
738 SE S MELROSE	SR 21 E, FL 32666		
El Number	: 59-6196009	FEI Number Applied For	( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
lame and	d Address of (	Current Registered Age	ent: Name and Address of New Registered Agent:
ROUTE 3	ON, JOHN, ES , BOX 3050 E, FL 32666	QUIRE US	
	e named entity e of Florida.	submits this statement fo	for the purpose of changing its registered office or registered agent, or both,
SIGNATU			
	Electron	nic Signature of Register	red Agent Date
FFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
itle: lame: ddress: city-St-Zip: itle: lame:	SHAW, LAWSO 6630 VIRGINIA KEYSTONE HE V ( FERNANDEZ,	NBEACH EIGHTS, FL 32656 ) Delete JERRY	Title: P (X) Change ( ) Addition Name: HUMBERT, PEGGY Address: 61 SE 46TH LOOP City-St-Zip: KEYSTONE HEIGHTS, FL 32656  Title: ( ) Change ( ) Addition Name:
ddress: ity-St-Zip: tle:		STREET   EIGHTS, FL 32656   Delete	Address: City-St-Zip:
	JOHNSON, FR	ED	Title: ( ) Change ( ) Addition
ame: ddress:	6852 CRYSTAI KEYSTONE HE	L LAKE RD EIGHTS, FL 32656	Name: Address: City-St-Zip:
ame: ddress: itty-St-Zip: ittle: lame: ddress:	KEYSTONE HE	EIGHTS, FL 32656 ) Delete RRIE ST	Name: Address:
lame: .ddress: bity-St-Zip: itle: lame: .ddress: bity-St-Zip: itle: lame: .ddress: itle: lame: .ddress:	KEYSTONE HE D ( MILLIGAN, CAI 2962 SE 50TH MELROSE, FL	EIGHTS, FL 32656  ) Delete RRIE ST 32666  ) Delete LONELL	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:

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: LYNN MCKELLIPS TREA 04/10/2009