

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # 710691**

1. Entity Name  
FIRST PRESBYTERIAN CHURCH OF TITUSVILLE,  
FLORIDA, INC.



Principal Place of Business  
1235 S.PARK AVE.  
TITUSVILLE, FL 32780

Mailing Address  
1235 S.PARK AVE.  
TITUSVILLE, FL 32780

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90248 028 \*\*\*\*61.25

**54030623**

**(710691=====N)**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01122004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number  
59-0994325

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MASSEY, JERRY  
3010 MULBERRY-DRIVE  
TITUSVILLE, FL 32780

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT ☒ Delete  
NAME VAN COTT, VICKI  
STREET ADDRESS 190 E OLMSTEAD H 10  
CITY-ST-ZIP TITUSVILLE, FL 32780

TITLE PT ☒ Change ☐ Addition  
NAME McConnell, Jack  
STREET ADDRESS 1685 Yorktown Avenue  
CITY-ST-ZIP Titusville, FL 32796

TITLE VPT ☐ Delete  
NAME ETHEREDGE, SARAH  
STREET ADDRESS 895 HIGHLAND TERRACE  
CITY-ST-ZIP TITUSVILLE, FL 32796

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TRT ☒ Delete  
NAME CHAMBERLAIN, RICHARD  
STREET ADDRESS 4905 CARODOC CIRCLE  
CITY-ST-ZIP TITUSVILLE, FL 32796

TITLE TRT ☒ Change ☐ Addition  
NAME Boonstra, Judy  
STREET ADDRESS 3486 Trevino Circle  
CITY-ST-ZIP Titusville, FL 32780

TITLE ST ☐ Delete  
NAME TURKALI, NANCY  
STREET ADDRESS 1385 GOLFVIEW DRIVE  
CITY-ST-ZIP TITUSVILLE, FL 32780

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-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 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:**

*Judy A. Boonstra* Judy A. Boonstra Treasurer 03/28/2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone