

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710952 (3)
1. Corporation Name
SOUTHMINSTER PRESBYTERIAN CHURCH, INCORPORATED



Principal Place of Business Mailing Address
730 BEVILLE RD.
DAYTONA BEACH FL 32114 730 BEVILLE RD.
DAYTONA BEACH FL 32114

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/26/1966		3a. Date of Last Report 02/02/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2009668		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

CLARKE, HUGH
1189 AVIENDA DEL TORO
DAYTONA BEACH FL 32119

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and then applicable (NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	<input type="checkbox"/> DELETE		11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DAVIS, HOLMES			12 NAME			
STREET ADDRESS	934 DUNCAN ROAD			13 STREET ADDRESS			
CITY-ST-ZIP	SOUTH DAYTONA FL			14 CITY-ST-ZIP			
TITLE	DV	<input checked="" type="checkbox"/> DELETE		21 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASE, MAX			22 NAME	Polito, James		
STREET ADDRESS	112 ALBATROSS WAY			23 STREET ADDRESS	917 Oetter Drive		
CITY-ST-ZIP	DAYTONA BEACH FL 32119			24 CITY-ST-ZIP	South Daytona, FL 32119		
TITLE	DS	<input checked="" type="checkbox"/> DELETE		31 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HUGH, CLARKE			32 NAME	Hoersting, Dolores		
STREET ADDRESS	1189 AVIENDA DEL TORO			33 STREET ADDRESS	631 Katherine Street		
CITY-ST-ZIP	DAYTONA BEACH FL			34 CITY-ST-ZIP	South Daytona, FL 32119	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	DT	<input type="checkbox"/> DELETE		41 TITLE			
NAME	BOND, ROMINE			42 NAME			
STREET ADDRESS	2341 GREEN STREET			43 STREET ADDRESS			
CITY-ST-ZIP	SOUTH DAYTONA FL 32119			44 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James J. Polito

James J. Polito

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96

Date

(904)253-2324

CR2E037 (12/95)