

FILE NOW: FILING FEE IS \$61.25

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Aug 01 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 711190 (9)

1. Corporation Name
FIRST PRESBYTERIAN CHURCH OF FORT LAUDERDALE, FLORIDA, INC.

Principal Place of Business 401 S.E. 15TH AVE. FT LAUDERDALE FL 33301	Mailing Address 401 S.E. 15TH AVE. FT LAUDERDALE FL 33301-2364
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21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 07/14/1966	3a. Date of Last Report 09/03/1996
4. FEI Number 59-0725544	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HARBERTS, STEVEN L
2800 N.E. 22ND STREET
FT. LAUDERDALE FL 33305**

10. Name and Address of New Registered Agent

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	VORDERMEIER, HARRY J	
STREET ADDRESS	2836 N.E. 22ND STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL 33305	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	DOBBINS, ALAN B III	
STREET ADDRESS	4317 N.E. 22 AVENUE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	REID, AGNES	
STREET ADDRESS	2904 N. ATLANTIC BLVD.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CHAPPELL, HUGH E	
STREET ADDRESS	328 CORAL WAY	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	J. Ronald Castell
5.3 STREET ADDRESS	32 Isla Bahia Dr
5.4 CITY-ST-ZIP	Ft Lauderdale, FL 33316
6.1 TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Mary Alice Denny
6.3 STREET ADDRESS	640 Densington Place
6.4 CITY-ST-ZIP	Wilton Manors, FL 33305

14. I do 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 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 _____

CR2E037 (9/96)