

FILE NOW: FILING FEE IS \$61.25

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**Mar 19 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 711808 (6)

1. Corporation Name
PRESBYTERIAN CHURCH OF SEFFNER, INC.



Principal Place of Business 1906 SOUTH LENNA AVENUE P O BOX 545 SEFFNER FLORIDA 33584	Mailing Address 1906 SOUTH LENNA AVENUE P O BOX 545 SEFFNER FLORIDA 33583-5406 US
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3. Date Incorporated or Qualified
11/16/1966

4. FEI Number
00-7118089

Applied For	Not Applicable
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2. Principal Place of Business	2a. Mailing Address
21 Sulte, Apt. #, etc.	26 Sulte, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**MCCOY, JOHANNA
2414 KINGSWAY ROAD
P.O. BOX 12
SEFFNER FL 33584**

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 type="checkbox"/> DELETE
NAME	FRISKNEY, ROBERT	
STREET ADDRESS	1903 LAKEVIEW AVE	
CITY-ST-ZIP	SEFFNER FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SCOTT, TOM	
STREET ADDRESS	509 CAUDLER PARK RD	
CITY-ST-ZIP	SEFFNER FL	
TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	BAY, JIM	
STREET ADDRESS	803 CHESS PLACE	
CITY-ST-ZIP	SEFFNER FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	EURTON, JUDY	
STREET ADDRESS	222 BALL PARK AVE	
CITY-ST-ZIP	SEFFNER FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SMITH, RON	
STREET ADDRESS	P.O. BOX 1345 N/A	
CITY-ST-ZIP	THONOTOSSASSA FL 33592	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MCCOY, JOHANNA	
STREET ADDRESS	2414 KINGSWAY ROAD P.O. BOX 12	
CITY-ST-ZIP	SEFFNER FL	

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 checked="" type="checkbox"/> Addition
3.2 NAME	DVP
3.3 STREET ADDRESS	Thatcher, Deb
3.4 CITY-ST-ZIP	5210 Orange Avenue Seffner, FL 33584
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Johanna McCoy* **REGISTERED**

CR2E037 (10/97)