2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711808

FILED Jan 19, 2009 Secretary of State

Entity Name: PRESBYTERIAN CHURCH OF SEFFNER, INC.

Current Principal Place of Business: New Principal Place of Business: 1906 SOUTH LENNA AVENUE SEFFNER, FL 33584 **Current Mailing Address: New Mailing Address:** P.O. BOX 545 SEFFNER, FL 33583 US FEI Number: 00-7118089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, RONALD E 10552 TAYLOR ROAD THONOTOSASSA, FL 33592 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HEIDT, JAY Name: Name: 1904 LENNA AVE. Address: Address: City-St-Zip: SEFFNER, FL 33584 US City-St-Zip: Title: () Delete Title: (X) Change () Addition RUTH, RICHARD Name: DOYLE, WAYNE Name: Address: 2109 ARBOR OAKS DR. Address: 502 RUNNING HORSE RD. City-St-Zip: VALRICO, FL 33594 US City-St-Zip: SEFFNER, FL 33584 US Title: () Delete Title: () Change () Addition MASON, JEFF Name: Name: 1207 LADY ELAINE DR. Address: Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: MCCOY, JOHANNA Name: Address: 2414 KINGSWAY RD Address: City-St-Zip: SEFFNER, FL 33584 US City-St-Zip: Title: () Delete Title: () Change () Addition BARRY, BILL Name: Name: 2236 EAGLE BLUFFS DR. Address: Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: Title: () Delete Title: () Change () Addition SMITH, RONALD E Name: Name: Address: 10552 TAYLOR ROAD Address: THONOTOSASSA, FL 33592 US City-St-Zip: City-St-Zip:

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: RONALD E. SMITH TD 01/19/2009