## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 31 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 713472

(9)

THE FIRST PRESBYTERIAN CHURCH OF PALATKA, INC.							
Principal Place of Business		Mailing Address	Mailing Address			Bigge Ribit nenti mebit pibit	
23 SOUTH 2ND STREET 123 SOUTH 2ND STREET ALATKA FL 32177-4706 PALATKA FL 32177-4706							
					3. Date incorporated or Qualified 10/17/1967	3a. Date of Last R 03/29/1996	
2. Principal Place of Business		2a. Mailing Address 26	<del>                                     </del>			4. FEI Number Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 Added t	
<b>Z</b> ip <b>24</b>	· · · · · · · · · · · · · · · · · · ·		Count	ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes 🔀 No		
	9. Name and Address of Cur				10. Name and Address of New Reg		
		, , , , , , , , , , , , , , , , , , , ,	8	1 Name		<u> </u>	
GRANT, DOUG			8	2 Street Addr	ess (P.O. Box Number is Not Acceptable)		
rt 4 Box 1703 Palatka, Florida			8	3			
PALATDA			В	1		FL	Code
11. Pursuant t office or re agent. I a	to the provisions of Sections 617; egistered agent, or both, in the Si m familiar with, and accept the of	0502 and 617.1508, Florida Statutes tate of Florida. Such change was au bligations of, Section 617.0503, Flor	s, the abouthorized ( ida Statut	ve-named corp by the corporat es.	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing it the appointment as	s registered registered
SIGNATURE _	Signature, typed or printed name of registerer	A Carolina Manufachia (AIOTE	Conintered A		and the professional	DAYE	
12.		AND DIRECTORS	13.	Ogur e.Sustme. techni	ired when reinstating) ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	7	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	GARDNER, H L, JR		1.2 NAM	£			
STREET ADDRESS	RT 1 BOX 810 N/A		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	PALATKA, FL 00000		1.4 CITY	-ST-ZIP			
TITLE	Ť	DELETE	2.1 TITLE	<u> </u>		☐ Change	Addition
NAME	GRANT, DOUG		2.2 NAM				
STREET ADDRESS	RT 4 BOX 1703			ET ADDRESS			
CITY - ST - ZIP	PALATKA FL	DELETE		/-ST-ZIP		Change	Addition
TITLE	T	L. VCLCIC	3.1 TITLE			☐ Change	MODIRON
NAME .	JONES,F. R.		3.2 NAM	-			
STREET ADDRESS	RT 1 BOX 430 PALATKA FL			EET ADDRESS			
CITY-ST-ZIP TITLE	T	☐ DELETE	4.1 TITLE	/-ST-ZIP		Change	Addition
NAME	MOTES, C. L.	· ·	4. 2 NAN			-	_
STREET ADDRESS	RT 1 BOX 605A			ET ADDRESS			
CITY-ST-ZIP	PALATKA FL			-ST-ZIP		,	
TITLE	[ALAIM IL	DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAM	IE .	,		•
STREET ADDRESS			5.3 STRE	EET ADDRESS	1 <u>1</u>		
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	<u></u>		
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAM	E	2.5		•
STREET ADDRESS			6.3 STR	EET ADDRESS			
CITY-ST-ZIP			6.4 CITY	-ST-ZIP			. <u></u>
14. I do hereh	by certify that the information sup	plied with this filing does not qualify	for the e	xemption states	d in Section 119.07(3)(i), Florida Statutes at my signature shall have the same lega	s. I further certify that	the
I am an of	ifficer or director of the corporatio	on or the receiver or trustee empowerd, or on an attachment with an addr	ered to exi	ecute this repo	ort as required by Chapter 617, Florida S	tatutes; and that my r	name