

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 14, 2009
Secretary of State**

DOCUMENT# 713472

Entity Name: THE FIRST PRESBYTERIAN CHURCH OF PALATKA, INC.

Current Principal Place of Business:

123 SOUTH 2ND STREET
PALATKA, FL 321774706

New Principal Place of Business:

Current Mailing Address:

123 SOUTH 2ND STREET
PALATKA, FL 321774706

New Mailing Address:

FEI Number: 59-0689704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, CONNIE
100 OAK ROAD
EAST PALATKA, FL 32131 US

Name and Address of New Registered Agent:

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:

Title: T () Delete
Name: THOMAS, CONNIE
Address: 100 OAK ROAD
City-St-Zip: EAST PALATKA, FL 32131

Title: T () Delete
Name: HARTWIG, BOB
Address: 543 W. RIVER ROAD
City-St-Zip: PALATKA, FL 32177

Title: T () Delete
Name: SLOAN, BRAD
Address: 129 WALTON ROAD
City-St-Zip: EAST PALATKA, FL 32131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change () Addition
Name: THOMAS, CONNIE
Address: 100 OAK ROAD
City-St-Zip: EAST PALATKA, FL 32131

Title: MR (X) Change () Addition
Name: HARTWIG, BOB
Address: 543 W. RIVER ROAD
City-St-Zip: PALATKA, FL 32177

Title: MR (X) Change () Addition
Name: SLOAN, BRAD
Address: 129 WALTON ROAD
City-St-Zip: EAST PALATKA, FL 32131

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: CONNIE THOMAS

Electronic Signature of Signing Officer or Director

MRS

01/14/2009

Date