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FILED

Feb 28 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 714987 (5)

1. Corporation Name

FIRST PRESBYTERIAN CHURCH OF PORT RICHEY, INC.

Principal Place of Business

Mailing Address

7540 RIDGE RD
PORT RICHEY FL 346687540 RIDGE RD
PORT RICHEY FL 34668-70283. Date Incorporated or Qualified
07/23/19683a. Date of Last Report
01/24/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1638754

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALMESE, MARTHA
9211 GLEN MOOR LANE
PORT RICHEY FL 34668

81 Name

Scott Davis

82 Street Address (P.O. Box Number is Not Acceptable)

8645 Pampa Way

83

84 City

Port Richey

FL

85 Zip Code

34668

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

X Scott Davis SECRETARY

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/9/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	WEBSTER, KENNON	
STREET ADDRESS	7530 NEBRASKA AVE.	
CITY-ST-ZIP	NEW PORT RICHEY FL	
TITLE	V	☒ DELETE
NAME	WILSON, JEANNE	
STREET ADDRESS	9115 PANDA LANE	
CITY-ST-ZIP	PORT RICHEY FL	
TITLE	SD	☒ DELETE
NAME	PALMESE, MARTHA	
STREET ADDRESS	9211 GLEN MOOR LANE	
CITY-ST-ZIP	PORT RICHEY FL	
TITLE	TD	☐ DELETE
NAME	KEMPF, ROBERT	
STREET ADDRESS	9201 MARK TWAIN LANE	
CITY-ST-ZIP	PORT RICHEY FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	Ed McGee, Vice Pres.
2.3 STREET ADDRESS	6232 Bayside Drive
2.4 CITY-ST-ZIP	New Port Richey, FL 34652
3.1 TITLE	☐ Change ☒ Addition
3.2 NAME	Scott Davis, Sec'y.
3.3 STREET ADDRESS	8645 Pampa Way
3.4 CITY-ST-ZIP	Port Richey, FL 34668
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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:

K. Webster
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0068396

1-27-97 (813) 849 1898

CR2E037 (9/96)