2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 714987 Feb 22, 2007 08:00 AM 1. Entity Name **Secretary of State** FIRST PRESBYTERIAN CHURCH OF PORT RICHEY, INC. Principal Place of Business Mailing Address 7540 RIDGE RD PORT RICHEY FL 34668 7540 RIDGE RD PORT RICHEY FL 34668 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, otc. 1st MOORE CR2E037 (10/06) City & State City & State Applied For 4. FEI Number 59-1638754 Not Applicable Zip Country 7_{in} Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PALMESE, MARTHA Street Address (P.O. Box Number is Not Acceptable) 9211 GLEN MOOR LANE PORT RICHEY FL 34668 Zıp Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typod or printed name of registered agoni and little if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Wiff. Delete TITLE ☐ Change Addition NAME WESTRATE, HAROLD NAME STREET ADDRESS STREET ADDRESS 9444 STONEWALL LANE U00000644039 CITY-SI-ZIP NEW PORT RICHEY FL 34655 CiTY-ST-ZIP <u>03/02/07-80026-006 61.25</u> ☐ Delete TITLE. ☐ Change ☐ Addition NAME DAVID, HARRINGTON NAME: STRLET ADDRESS 11000 SALT TREE DRIVE STREET ADORLSS CHY-SI-7P PORT RICHEY FL 34668 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME PALMESE, MARTHA NAME STREET ADDRESS STREET ADDRESS 9211 GLEN MOOR LN CITY+SI-ZIP CITY-ST-7IP PORT RICHEY FL 34668 Change THE ☐ Delete Addition TITLE NAMI' LEGGIO, ANTHONY STREET ADDRESS STREET ADDRESS 8039 CEDAR CRK DR CITY-SI-ZIP CITY-SI-ZIP NEW PORT RICHEY FL 34653 TITLE ☐ Delete TITLE ☐ Change Addition NAM! DALY, FAY NAME STREET ADDRESS STREET ADDRESS 3815 LIGHTHOUSE WAY CITY-ST-ZIP NEW PORT RICHEY FL 34652 CITY-S1-7IP ☐ Defete IIILE Change Addition NAME LEATHERBERRY, DOROTHY V STREET ADDRESS STREET ADDRESS 6220 TOWER DR City-St-7iP HUDSON FL 34667 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes ! further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under earl; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like compowered.

SIGNATURE:

FILED