2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 20, 2008 08:00 A Secretary of State

DOCL	JMENT	# 71	8364
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1. Entity Name

SEVÉN RIVERS PRESBYTERIAN CHURCH, INC.



Principal Place of Business

Mailing Address

4221 W GULF TO LAKE HWY LECANTO, FL 34461 US 4221 W GULF TO LAKE HWY LECANTO, FL 34461 US



DO NOT WRITE IN THIS SPACE

03122008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2276512

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANTANA, THEODORE C 9140 S LONGBRANCH AVE INVERNESS, FL 34452

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent							
SIGNATURE							
	Filing Fee is \$61.25 Due by May 1, 2008 9. Efection Campaign Finan Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECTORS				1/0.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEPHENSON, JOHN 17 S MAYLEN AVE LECANTO, FL 34461	:			000000864896 04/07/08-80005-025 61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SANTANA, THEODORE 9140 S LONGBRANCH AVE INVERNESS, FL 34452						
TITLE NAME STREET ADDRESS CHY-ST-ZIP	SD JULIAS, BROOK 6710 N PARAQUA CIRCLE CRYSTAL RIVER, FL 344286996			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILLIAMS, GEORGE 21069 DANDY RD BROOKSVILLE, FL 34601			IN '	THIS SPACE		
THILE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS			***·	A STATE OF S	Outpuble is a display in the second of the second		
CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							

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CL CAME K. BIQIT GRATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR