FILE NOW	: FILING	FEE IS	\$61.25
----------	----------	--------	---------

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

718856

(8)

THE WARRINGTON PRESBYTERIAN CHURCH



Principal Place of Business Mailing Address							
406 S NAVY BLVD WARRINGTON FL 32507 WARRINGTON FL 32507 WARRINGTON FL 32507		17					
	-		,,		3. Date Incorporated or Qualified 07/14/1970	3a. Date of Last Report 05/01/1995	
Principal Place of B 1	Suite, Apt. #, etc. Suite, Apt. #, etc				4. FEI Number 59-0668497	Applied F	
22					5. Certificate of Status Desired	\$8.75 Addition	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	S5.00 May B	
Zip 24	Country 25	Zip 29	Count 30	ry		itangible tax under s. 199.032, Yes 🔼 No	
9. N	ame and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
Larkin, C. Nei 2324 Grundy Pensacola Fi	STREET		8	Name Street Add	ress (P.O. Box Number is Not Acceptable	3)	
11. Pursuant to the pr	ovisions of Sections 617,0502	and 617.1508, Florida Statut	os the about	4 City	ration submits this statement for the purp	FL 85 Zip Code ose of changing its registered	
familiar with, and a	t, or both, in the State of Florid: accept the obligations of, Section	a. Such change was authoriz in 617.0503, Florida Statutes	ed by the car s.	poration's boa	ration submits this statement for the purp rd of directors. I hereby accept the appoi	ntment as registered agent. La	
Signature, I	typed or printed name of registered agent a	nd title if applicable. (NO	OTE: Registered Ad	ient signature require	d wher reinstaling)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
STREET ADDRESS 8010	GHTON, CHAPMAN L. WINODEE RD.	DELETE	1.1 TITLE 1.2 NAMI 1.3 STRE			☐ Change ☐ Addi	
	SACOLA FL		1.4 CITY	·ST-ZIP			
	SEN, JAMES	DELETE	2.1 TITLE 2.2 NAME			☐ Change ☐ Addi	
CITY-ST-ZIP PENS	RENTZ AVE. SACOLA FL		2.3 STREI 2. 4 GITY	FT ADDRESS - ST- ZIP			
	(IN, C. NED	DEFELE	3 1 TITLE 3 2 NAME			Change Addil	
CITY-ST-ZIP PENS	GRUNDY ST. SACOLA FL		3.3 STREE 3.4. CITY	T ADDRESS -ST-ZIP			
TITLE D	N	DELETE	4.1 TITLE			Cnange Addit	
	NY, CHARLIE		4. 2 NAM				
DEM	SE BAUBLITS DR		4.3 STREE	T ADDRESS			
	SACOLA FL		4.4 CITY-	ST-ZIP			
TITLE		☐ D€LETE	51 TITLE			Change Addit	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP		The sec	5.4 CITY-	ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change Addit	
NAME STREET ADDRESS			62 NAME				
STREET ADDRESS				T ADDRESS			
14. Ldo hereby certify t	hat the information supplied	th this films in potentials f	6.4 CITY-	ST-ZIP	or the exemption stated in Section 110.0		

certify that the information indicated on this annual report or supplied with this timing is volontarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that I am an officer or director of the corporation of the ecorety of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 transport of the ecorety of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name

CI		A I	A	TI	•	_	_
	113	N	-			-	┣-

NAME OF SIGNING OFFICER OR DIRECTOR

2/9/96 904-455-0301 Daytime Phone #