

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90304 046 ****61.25

DOCUMENT # 718856

1. Entity Name

THE WARRINGTON PRESBYTERIAN CHURCH



Principal Place of Business

**406 S NAVY BLVD
PENSACOLA FL 32507-3331**

Mailing Address

**406 S NAVY BLVD
PENSACOLA FL 32507-3331**

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

32507-3331

Country

Escambia

Zip

32507-3331

Country

USA

4. FEI Number

NO-T APPLICABLE

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

~~LARKIN, C. NED~~
~~2324 GRUNDY STREET~~
~~PENSACOLA FL 32507~~

James E. Hansen
200 Rentz Ave.
Pensacola, FL 32507

7. Name and Address of New Registered Agent

Name

James E. Hansen

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

200 Rentz Ave. Pensacola, FL 32507

City

Pensacola,

FL

Zip Code
32507

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

James E. Hansen

3-8-05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **AD** ☐ Delete
NAME **TRIPP, DONALD**
STREET ADDRESS **10100 HILLVIEW RD #101**
CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **VP Treasurer** ☐ Delete
NAME **DENTON, DORIS**
STREET ADDRESS **619 WOODSMAN DRIVE**
CITY-ST-ZIP **PENSACOLA FL 32506**

TITLE **ST/ President** ☐ Delete
NAME **HANSEN, JAMES E**
STREET ADDRESS **200 RENTZ AVENUE**
CITY-ST-ZIP **PENSACOLA FL 32507**

TITLE **P** ☒ Delete
NAME ~~LARKIN, C. NED~~
STREET ADDRESS ~~2324 GRUNDY STREET~~
CITY-ST-ZIP ~~PENSACOLA FL 32507~~

TITLE **Secretary** ☐ Delete
NAME **DESTELI, LU**
STREET ADDRESS **10594 FAIR PINE DR.**
CITY-ST-ZIP **PENSACOLA FL 32506**

TITLE **D** ☐ Delete
NAME **BODDY, MICHAEL**
STREET ADDRESS **708 COLEMAN PLACE DRIVE**
CITY-ST-ZIP **PENSACOLA FL 32526**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME **Donald E. Tripp**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **Doris Denton**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **J. E. Hansen**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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.

SIGNATURE:

James E. Hansen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-05

Date

850-455-0301

Daytime Phone #