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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 723105

1. Corporation Name

**WESTMINSTER PRESBYTERIAN CHURCH OF FORT WALTON B
EACH, INC**

Principal Place of Business
2 WOODHAM ST
FT WALTON BCH FL 32547

Mailing Address
2 WOODHAM ST
FT WALTON BCH FL 32547



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/10/1972	
4. FEI Number 59-0943260		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		5.00 May Be Added to Fees		9. Name and Address of Current Registered Agent BOSWELL, KENNETH M. 308 STILLWATER COVE DESTIN FL 32541	
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 308 83 84 City FL 85 Zip Code					

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		Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PCD	DELETE	1.1 TITLE	PCD	Change	Addition	
NAME	ROBERTSON, SCOTTY		1.2 NAME	MARK KOCH			
STREET ADDRESS	1222 TWIN BAY DR		1.3 STREET ADDRESS	1695 PARKSIDE Circle			
CITY-ST-ZIP	FT. WALTON BEACH FL 32547		1.4 CITY-ST-ZIP	NICEVILLE, FL 32578			
TITLE	VCD	DELETE	2.1 TITLE	RANDY SEAY	Change	Addition	
NAME	BOSWELL, STEVE		2.2 NAME	834 DUNBROOK DA			
STREET ADDRESS	331 ANTIGUA WAY		2.3 STREET ADDRESS	Fort WALTON BCH, FL 32547			
CITY-ST-ZIP	NICEVILLE FL 32518		2.4 CITY-ST-ZIP				
TITLE	TD	DELETE	3.1 TITLE		Change	Addition	
NAME	BOSWELL, KEN		3.2 NAME				
STREET ADDRESS	308 STILLWATER COVE		3.3 STREET ADDRESS				
CITY-ST-ZIP	DESTIN FL 32541		3.4 CITY-ST-ZIP				
TITLE	S	DELETE	4.1 TITLE		Change	Addition	
NAME	BEARD, BRYAN		4.2 NAME				
STREET ADDRESS	96 YACHT CLUB DR NE UNIT 8		4.3 STREET ADDRESS				
CITY-ST-ZIP	FT WALTON BEACH FL 32548		4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. 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 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, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED** 3/3/99 Date Daytime Phone #