

4/9/

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 12, 2002 8:00 am
Secretary of State

04-09-2002 90017 037 ****61.25

DOCUMENT # 723105

1. Entity Name

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

Principal Place of Business

Mailing Address

**2 WOODHAM ST
FT WALTON BCH FL 32547****2 WOODHAM ST
FT WALTON BCH FL 32547**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0943260

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LINN, JOHN R JR
783 E MIRACLE STRIP
MARY ESTHER FL 32569**

Name

Boswell, Ken

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

212 Mattie's Way

City

Destin,**FL**Zip Code
32541

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/22/02**FILE NOW: FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCD
BOSWELL, STEVE
331 ANTIQUA WAY
NICEVILLE FL 32578** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VCD
SEAY, RANDY
834 OVERBROOK DR
FORT WALTON BCH FL 32547** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VCD
BEARD, BRYAN
96 Yacht Club Dr. NE Unit #8, FWB, FL** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
LINN, JOHN
783 E MIRADE STRIP PARKWY
MARY ESTHER FL 32549** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BOSWELL, KEN
212 Mattie's Way
Destin, FL 32541** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HIGHERS, TED
228 MARSHALL DRIVE NE
FORT WALTON BEACH FL 32547** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
ROBERTSON, JERRY
1205 Oakmont Dr.
Niceville, FL 32578** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/1/02**850-862-8825**

CR25037 (9/01)