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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 724718

1. Corporation Name

FIRST PRESBYTERIAN CHURCH OF SANFORD, FL., INC.

Principal Place of Business

301 OAK AVE
 SANFORD FL 32771

Mailing Address

301 OAK AVE
 SANFORD FL 32771



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

11/03/1972

4. FEI Number

59-0737881

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SWEETING, DR. LURLENE
 400 PINE AVE
 SANFORD FL 32771

10. Name and Address of New Registered Agent

81 Name

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

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

Lurlene Sweeting, M.D.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

T DELETE

NAME BRUMLEY, JOHN. SR
 STREET ADDRESS 2000 PALMETTO AVE
 CITY-ST-ZIP SANFORD, FL 00000

C DELETE

NAME HUNTER, ROBERT
 STREET ADDRESS 3730 KENTUCY ST
 CITY-ST-ZIP SANFORD FL

D DELETE

NAME PAUL, HORACE
 STREET ADDRESS 1200 RHINEHART RD
 CITY-ST-ZIP SANFORD FL

D DELETE

NAME WELD, GEORGE
 STREET ADDRESS 600 EAST 20TH STREET
 CITY-ST-ZIP SANFORD FL 32771

C DELETE

NAME DOKTOR, KENNETH
 STREET ADDRESS 307 LARKWOOD DR
 CITY-ST-ZIP SANFORD FL

S DELETE

NAME SWEETING, LURLENE
 STREET ADDRESS 400 PINE AVE
 CITY-ST-ZIP SANFORD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

C
 ROB PEARCE
 230 LAKEVIEW DR.
 SANFORD, FL. 32773

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

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: *John W. Brumley, Jr.*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-99 407-322-2662
 Date Daytime Phone #

CR2E037 (11/98)