

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725374

FILED  
Apr 10, 2009  
Secretary of State

**Entity Name:** FIRST PRESBYTERIAN CHURCH OF APOPKA, FLORIDA, INC.

**Current Principal Place of Business:**

500 S. HIGHLAND STREET  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

500 S. HIGHLAND STREET  
APOPKA, FL 32703

**New Mailing Address:**

FEI Number: 59-1523929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBERSON, ROBBIE  
6923 OSWEGA DR  
MOUNT DORA, FL 32757 US

**Name and Address of New Registered Agent:**

ROBERSON, ROBERT R  
6923 OSWEGA DR  
MOUNT DORA, FL 32757 US

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: ROBERT R ROBERSON

04/10/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: LAND, JOHN  
Address: 525 S ALABAMA AVE  
City-St-Zip: APOPKA, FL 32703

Title: SD ( ) Delete  
Name: ROBERSON, ROBBIE  
Address: 6923 OSWEGA DR  
City-St-Zip: MOUNT DORA, FL 32757

Title: T ( ) Delete  
Name: HEARD, BOBBY  
Address: 1209 WOODSTOCK RD  
City-St-Zip: APOPKA, FL 32703

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: ROBERSON, ROBERT R  
Address: 6923 OSWEGA DR  
City-St-Zip: MOUNT DORA, FL 32757

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT R. ROBERTSON

SD

04/10/2009

Electronic Signature of Signing Officer or Director

Date