## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jun 04, 1999 8:00 am Secretary of State

06-04-1999 90007 048 \*\*\*\*61.25

DOCI	<b>JMENT</b>	# 1	7255	18
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1. Corporation Name

## THE NEW PHILADELPHIA PRESBYTERIAN CHURCH INC

726 S ADAMS ST P
OUINCY FL 32351
US U

lailing Address O BOX 344 UINCY FL 32353

2. 21	Principal Place of Busin	ness	2a 26	. Mailing Address		Date Incorporated or Qualifed     02/12/1973			
	Suite, Apt. #, etc.			Suite, Apt. #, etc.	•	4. FEI Number		Applied For	
22		ě	27			59-2470478		Not Applicable	
23	City & State	,	28	City & State		5. Certifcate of Status Desired		.75 Additional see Required	
24	Zip	Country 25	29	Zip Co	untry	6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
					81	Name			
BRUNSON, LESLIE 101 N BETLINET DR		82 Street Address (P.O. Box Number is Not Acceptable)							
	QUINCY FL 32351				83				
					84	City	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.

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature re	equired when reinstating) DA	E	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 12
TITLE	SD DELETE	1.1 TITLE		☐ Change	Addition
NAME	STEWART, ROBERT	1.2 NAME			
STREET ADDRESS	246 DUPONT ST	1.3 STREET ADDRESS			
CITY-ST-ZIP	QUINCY FL	1.4 CITY-ST-ZIP			
TITLE	PD DELETE	2.1 TILE	new officer to -	Change	Addition
NAME	GILBERT, JIM ED (7000)	2.2 NAME	The work of the t		
STREET ADDRESS	ROUTE 6 BOX, 378 QUINCY FL  COUNCY FL	2.3 STREET ADDRESS	elected short	Tu .	
CITY-ST-ZIP	QUINCY FL recently	2.4 CITY-ST-ZIP	200000	<u> </u>	
TITLE	TD DÉLETE	3.1 TITLE		☐ Change	☐ Addition
NAME	Brunson, Leslie	3.2 NAME			
STREET ADDRESS	101 N BETLINET	3.3 STREET ADDRESS			
CITY-ST-ZIP	QUINCY FL	3.4. CITY-ST-ZIP		<del></del>	T A LESS
TITLE	VD DELETE	4.1 TITLE		☐ Change	Addition
NAME	QUINTON, PAUL	4, 2 NAME			
STREET ADDRESS	1007 BELLAMY DR	4.3 STREET ADDRESS			
CITY-ST-ZIP	QUINCY FL	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	C) DELETE	6.1 TTTLE		Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
	1				

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:**