**NONPROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

# **DOCUMENT # 726585**

1. Corporation Name

### WESTMINSTER PRESBYTERIAN CHURCH

Principal Place of Business

4201 N.E. 2ND AVENUE MIAMI FL 33137

Mailing Address

4201 N.E. 2ND AVENUE

MIAMI FL 33137

# **FILED** Feb 27, 1999 8:00 am Secretary of State

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———	Place of Business	2a. Mailing Address	Mailing Address		3. Date Incorporated or Qualifed 06/01/1973	
21 Suite, Apt	t t air	Suite, Apt. #, etc.			4. FEI Number Applied For	
<b>⊢</b> ¬ ''	<del>11</del> , 510.	27			59-0696298 Not Applicable	
City & Sta	ate		City & State		_ \$8.75 Additional	
23		28			5. Certificate of Status Desired Fee Required	
Zip	Country	Zip	Country	<del>_</del>	6. Election Campaign Financing S5.00 May Be	
24	25	29 3	آ آ		Trust Fund Contribution Added to Fees	
	9. Name and Address of Currer				10. Name and Address of New Registered Agent	
<del></del>			81	Name		
WOICHT CEODOL W. ID I				82 Street Address (P.O. Box Number is Not Acceptable)		
	WRIGHT, GEORGE W., JR.J			Street A	Address (P.O. Box Number is Not Acceptable)	
44 WEST FLAGLER STREET			83			
MIAM! FL	. 33130			<u> </u>		
			84	1	FL 85 Zip Code	
office or	t to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was auth	ionzea by	the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I heraby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if analicable (NOTE: Re	oustered Age	nt signature re	required when reinstating) DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	X DELETE	1,1 TITLE		☐ Change ☐ Addition	
NAME	WENTWORTH, WYNONA		1.2 NAME	-		
STREET ADDRESS	MARK NE ME GOTTLE OTDERT			T ADDRESS	,	
	MIAMI FL		1.4 CITY-S	ļ	,	
CITY-ST-ZIP	PD	☐ DELETE	2.1 TITLE	1-21	☐ Change ☐ Addition	
TITLE	· -	C 522.0	2.2 NAME	ŀ		
NAME	THATCHER, JOHN					
STREET ADORESS				TADDRESS	e see es	
CITY-ST-ZIP	MIAMI FL	☐ DELETE	2.4 CITY-5 3.1 TITLE	ST-ZIP	☐ Change ☐ Addition	
TITLE	VD	□ pereie				
NAME	THOMAS, PHILLIP A.		3.2 NAME	<u> </u>		
STREET ADDRESS				TADORESS	• • •	
CITY-ST-ZIP	CORAL GABLES FL	N per exe	3.4. CITY-8	ST-ZIP	Change Addition	
TITLE	TD	Ø DELETE	4.1 TITLE	ļ	] Criange [] Addition	
NAME	MCCREA, SLOAN		4. 2 NAME	Ì		
STREET ADDRESS	T T		i .	TADDRESS		
CITY-ST-ZIP	MIAMI FL		4.4 CITY-S	T-ZIP	Tohang Madella	
TITLE		☐ DELETE	5.1 TITLE	l	TD Change 🛣 Addition	
NAME			5.2 NAME	<u>-</u>	CLAUDIO MOTTA	
STREET ADDRESS	<b>s</b> }			TADORESS	11810 N.E. XXX 19th DRIVE# 11	
CITY-ST-ZIP	ļ		5.4 CITY-S	T-ZIP	N. MIAMI, FL 33181	
TITLE	]	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS	5		6.3 STREE	T ADDRESS	, in the second of the second	
CITY-ST-ZIP			6.4 CITY-S	T-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, of on an attachment with an address, with all other like empowered.

SIGNATURE: