

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90241 008 ****70.00

DOCUMENT # 733106

1. Entity Name

WASHINGTON SHORES PRESBYTERIAN CHURCH, INC.



Principal Place of Business

3600 ROGERS DRIVE
ORLANDO FL 32805

Mailing Address

3600 ROGERS DRIVE
ORLANDO FL 32805

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1001091

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

HOOD, ULYSSES
1018 GOLDWYN AVE.
ORLANDO FL 32805

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

T
NAME SMITH, BETTY ☐ Delete
STREET ADDRESS 4347 ARNJO CT.
CITY-ST-ZIP ORLANDO FL 32812

D ☒ Delete
NAME BROWNING, LINDA
STREET ADDRESS 4039 BARNSLEY DRIVE
CITY-ST-ZIP ORLANDO FL 32812

D ☒ Delete
NAME WILSON, VIRGINIA
STREET ADDRESS 809 WOODEN BLVD
CITY-ST-ZIP ORLANDO FL 32805

D ☐ Delete
NAME ALFRED, HERBERT
STREET ADDRESS 3842 AVON CT.
CITY-ST-ZIP CLERMONT FL 34711

D ☐ Delete
NAME STOVES, MARY
STREET ADDRESS 201 ORTMAN DR
CITY-ST-ZIP ORLANDO FL 32811

D ☒ Delete
NAME MITCHELL, EDGAR
STREET ADDRESS 535 VERN DRIVE
CITY-ST-ZIP ORLANDO FL 32805

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

NAME Annie Aker ☐ Change ☒ Addition
STREET ADDRESS 6192 Brookhill Circle
CITY-ST-ZIP Orlando, FL 32810

NAME Linda J. Walker ☐ Change ☒ Addition
STREET ADDRESS 703-D Ivy Lane
CITY-ST-ZIP Orlando, FL 32811-4312

NAME Vice President ☐ Change ☒ Addition
STREET ADDRESS Shelley Glaspie
9104 Camden Gardens St
Orlando, Florida 32827

NAME Alice Kelly ☐ Change ☒ Addition
STREET ADDRESS 2800 LK Sunset Dr
Orlando, FL 32805

NAME Walter Carrington ☐ Change ☒ Addition
STREET ADDRESS 3520 Forestlane Dr
Orlando, FL 32808

NAME Kimberly Hunkerson ☐ Change ☒ Addition
STREET ADDRESS 514 Birch Ct
Apopka, FL 32712

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Ulysses G. Hood ULYSSES G HOOD

4-18-08