

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 734100 (1)  
1. Corporation Name

THE FIRST PRESBYTERIAN CHURCH OF TAMPA, INC

Principal Place of Business: 412 ZACK STREET TAMPA, FL 33602  
Mailing Address: 412 ZACK STREET TAMPA, FL 33602

3. Date Incorporated or Qualified: 10/20/1975  
3a. Date of Last Report: 03/20/95

2. Principal Place of Business (21) Suite, Apt #, etc (22) City & State (23) Zip (24) Country (25)  
2a. Mailing Address (26) Suite, Apt #, etc (27) City & State (28) Zip (29) Country (30)  
4. FEI Number: 59-0624395  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: DELL, RALPH C., ESQUIRE, 1240 BARNETT BANK BUILDING, 101 EAST KENNEDY BOULEVARD, TAMPA, FL 33602  
10. Name and Address of New Registered Agent: B1 Name, B2 Street Address (P.O. Box Number is Not Acceptable), B3, B4 City, FL, B5 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		DATE	
Signature: typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD HILL, LEWIS H., III	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1111 DUNBAR AVE	12 NAME	
STREET ADDRESS	TAMPA, FL 33629	13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	SD BAYSDEN, JOHN M.	21 TITLE	
NAME	524 Hilldale Rd	22 NAME	
STREET ADDRESS	BRANDON, FL 33510	23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	TD GREEN, VIRGINIA S.	31 TITLE	
NAME	1538 ARMAND CIRCLE	32 NAME	
STREET ADDRESS	TAMPA, FL 33634-2902	33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Virginia S. Green, Virginia S. Green 4/10/96 813 886-4592  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)

2-20-96