FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 734100

THE FIRST PRESBYTERIAN CHURCH OF TAMPA, INC.

Principal Place of Business 412 ZACK STREET **TAMPA FL 33602**

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

412 ZACK STREET **TAMPA FL 33602**

2a. Mailing Address

Suite, Apt. #, etc.

26

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90046 035 ****61.25



3. Date Incorporated or Qualifed

10/20/1975

4. FEI Number

22		27			59-0624395		Not.	Applicable
City & State City & State					E O W A GOLD Desired	\$	8.75 Ad	Iditional
3					5. Certificate of Status Desired		Fee Req	uired
	Zip Country Zip				6. Election Campaign Financir	10 - 5	55.00 M	lav Be
24	25 29 30			Trust Fund Contribution Added to Fee				
9. Name and Address of Current Registered Agent					10. Name and Address of Nev	w Registered Age	nt	
			81	Name				
DELL DALON C. FOOLHDE								
DELL, RALPH C., ESQUIRE				Street Address (P.O. Box Number is Not Acceptable)				
1240 BARNETT BANK BUILDING								
101 EAST KENNEDY BOULEVARD								
TAMPA FL 33602				City		FL 8	5 Zip Co	ode '
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the					y management of the second of			o distorad
office or r	egistered agent, or both, in the State	of Florida. Such change was a	uthorized by	the corporation	on's board of directors. I hereby ac	cept the appointme	ent as regi	stered
agent. I a	m familiar with, and accept the obliga	ations of, Section 617.0503, Flo	rida Statutes.			요네 (홍과 영화() () :		r'éd dai
SIGNATURE								· .
	Signature, typed or printed name of registered age			t signature require	d when reinstating) ADDITIONS/CHANGES TO	DATE	DECTOR	S IN 12
12.		ND DIRECTORS	13.	1	ADDITIONS/CHANGES TO		Change	Addition
TITLE	PD	☐ DELETE	1.1 TITLE		2 1 2 2 2	u	Citatige	Addition
NAME	HILL, LEWIS H. III		1.2 NAME			. •		
STREET ADDRESS	1111 DUNBAR AVE		1.3 STREET	ADDRESS		14.5		
CITY-ST-ZIP	TAMPA FL 33629		1.4 CITY-ST	r-ZIP				, 60 · · · <u> </u>
TITLE	SD	☐ DELETE	2.1 TITLE				Change	Addition
NAME	LAWYER, C M I		2.2 NAME					
STREET ADDRESS	3105 RIVER GROVE DR		2.3 STREET	ADDRESS	·			-
CITY-ST-ZIP	TAMPA FL 33610		2. 4 C/TY-S	T-ZIP		-		
TITLE	TD	☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	GREEN: VIRGINIA S.		3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP	TAMPA FL 33634-2902		3.4. CITY-S					
TITLE TO	TAMEA IL GOOGT ESGE	☐ DELETE	4.1 TITLE				Change	Addition
NAME	,	_ · · · ·	4.2 NAME			_		
-			4.3 STREET	ADDRESS			15.13	
STREET ADDRESS			4.4 CITY-ST			机能操纵机		22.1
CITY-ST-ZIP TITLE	10-12-	☐ DELETE	5.1 TITLE	- UF		<u></u>	Change	Addition
			5.2 NAME				•	- -
NAME			5.3 STREET	ADDRESS				
STREET ADDRESS	i.e.		5.4 CITY-ST		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
CITY-ST-ZIP	17.	☐ DELETE	6.1 TITLE) - EAT			Change	Addition
TITLE		□ DELETE	6.2 NAME			٠ .		- NO.
NAME				*DDDCCC				• : •
STREET ADDRESS			6.3 STREET					
CITY-ST-ZIP			6.4 CITY-ST	Γ-ZIP				

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.

813 229-0679

Applied For