

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 735381 (6)
1. Corporation Name
THE FIRST PRESBYTERIAN CHURCH - NICEVILLE, INC.



Principal Place of Business Mailing Address
1800 JOHN SIMS PKWY NICEVILLE FL 32578 1800 JOHN SIMS PKWY NICEVILLE FL 32578-2338

3. Date Incorporated or Qualified 03/25/1976 3a. Date of Last Report 02/27/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1564822 Applied For Not Applicable
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

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
SWAIN, MICHAEL
4557 NORTHRIDGE PL
NICEVILLE FL 32578
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP LEWIS, REGGIE P.O. BOX 721 N/A NICEVILLE FL	1.1 TITLE	DS VINCENT KANE 604 REGATTA DRIVE NICEVILLE FL
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D JOHNSON, FLOYD 2509 EDGEWATER DRIVE NICEVILLE FL	2.1 TITLE	D ROBERT BURNET 707 ST. ROSE COURT NICEVILLE FL
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D SANDER, RICHARD 19 PEMBROKE COURT NICEVILLE FL	3.1 TITLE	D ROBERT JONES 710 PUTTER DRIVE NICEVILLE FL
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D MYERS, DOUGLAS C 2418 ROBERTS DR NICEVILLE FL NICEVILLE FL	4.1 TITLE	D ROBERT WILSON 266 MISSISSIPPI AVENUE VALPARAISO FL
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D GERBER, JAMES 810 MAGNOLIA SHORES DRIVE NICEVILLE FL	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D REILLY, NEIL 3 MARINA COVE NICEVILLE FL 32578	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: _____ DATE: 3/12/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: VINCENT KANE Daytime Phone # 904-729-3010

CR2E037 (9/96)