

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736255

FILED
Feb 04, 2009
Secretary of State

Entity Name: DELTONA PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

2300 HOWLAND BLVD
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

2300 HOWLAND BLVD
DELTONA, FL 32738

New Mailing Address:

FEI Number: 59-2245957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACK, JAMES SR
1781 GATEWOOD DR
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

BLACK, JAMES N SR
1781 GATEWOOD DR
DELTONA, FL 32738 US

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.

SIGNATURE: JAMES N. BLACK, SR

02/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: WARD, KELLY
Address: 1118 CAMBRIDGE
City-St-Zip: DELTONA, FL 32725

Title: TD () Delete
Name: WARD, JAMES E SR
Address: 1255 INDIAN ROCK ST
City-St-Zip: DELTONA, FL 32725

Title: PD () Delete
Name: BLACK, JAMES SR
Address: 1781 GATEWOOD DR
City-St-Zip: DELTONA, FL 32738

Title: VPD () Delete
Name: RESNER, PAMELA K
Address: 1045 SEAGATE DR
City-St-Zip: DELTONA, FL 32725

Title: ATD () Delete
Name: DAVIS, SHERRY
Address: 1752 MAYHILL STREET
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: RESNER, DONALD L
Address: 1095 W. SEAGATE DR
City-St-Zip: DELTONA, FL 32725

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: RESNER, PAMELA K
Address: 1095 W. SEAGATE DR
City-St-Zip: DELTONA, FL 32725

Title: ATD (X) Change () Addition
Name: DAVIS, SHERRY L
Address: 1752 MAYHILL STREET
City-St-Zip: DELTONA, FL 32738

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD L. RESNER

SD

02/04/2009

Electronic Signature of Signing Officer or Director

Date